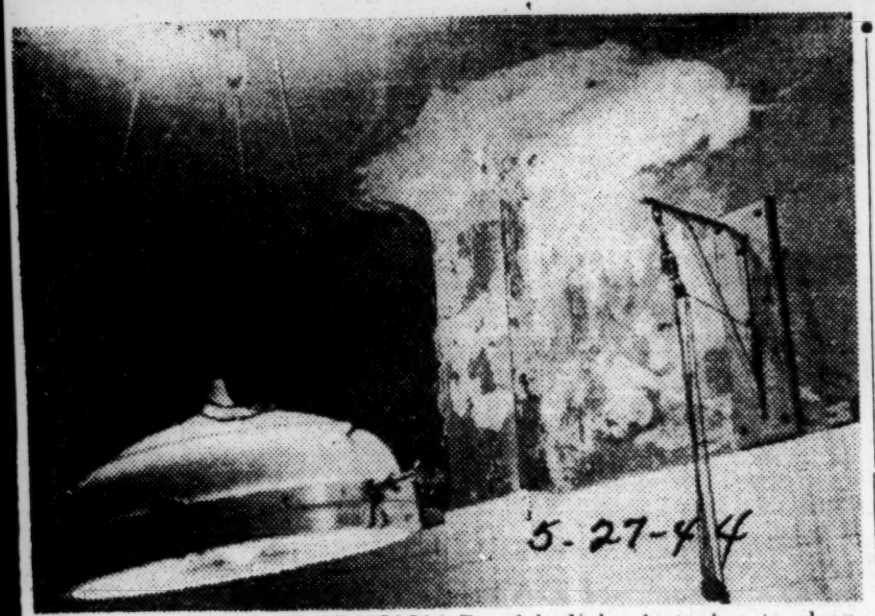
25-1944

Harlem Hospital Head Explains

People's Voice — New York, N.Y. 5-27-44



THESE ARE THE CONDITIONS People's Voice is trying to clear up at Harlem Hospital. Above is a close-up of a section of the ceiling above the operating table in the main operating room which is dangerously loose and which, to date, has not been repaired.—(Exclusive PV foto).

As a result of last week's front page story and pictures exposing unsanitary and neglected physical conditions of a Harlem Hospital operating room and relating reports of important operative equipment in bad repair and inadequate supply of instruments, shortage in personnel and underpaid anaesthetists, a flurry of denials, protests and accusations came from the hospital's executive and medical personnel. PV was charged with unfair journalistic tactics and with generating fear in the community against its only public hospital. Although a direct denial was made by the hospital superintendent, Dr. Emanuel Lipschitz, that there is a rise in death rate in first the four months of 1944 as compared to the years '42 and '43 and that conditions in Harlem Hospital, as compared to other City institutions, are any worse, no one as yet has denied that PV's pictures exposing delapidated walls, ceilings and run down machines were authentic. It is also a fact that the conditions referred to in PV's story are receiving immediate attention. However, the repair work that is being done, is a result of long term planning, according to the superintendent. HE DENIES THAT ANY OUTSIDE PRESSURE IS CAUSING HIM TO REPAIR BROKEN OPERATING ROOM SCREENS AND SUCTION MACHINES.

There has been no denial that there is an inadequate supply of operating instruments but rather explanations have been given for delays in repairs and filling of requisitions. For the most part the hospital's answers explain why conditions exist.

Although PV's article at no point suggested any direct criticism of the hospital personnel, the reaction to the story seemed to be taken personally. The equipment, supplies, salaries, and the condition of the physical plant of any public institution in the final analysis, is under the jurisdiction of the city budget. 5-27-44

The following are answers made to PV's story by the superintendent of the hospital:

● PHYSICAL PLANT. "Plans for reconditioning and painting of West Wing of main building have been formulated many months ago. Money has been appropriated and plans and specifications are before the Board of Estimates. The Department has long been aware of conditions and has been gradually proceeding with renovations of other units of the hospital. Reconstruction of East Wing was completed sometime ago. New out-patient building has been completed, of which three-fourths is at present in use for clinics. Old out-patient department has been rebuilt. Arrangements for repairs are effected by war time emergency period in which we operate. Materials, equipment, supplies and labor are not always immediately available. Repairs to operating room is only part of a project for renovation of the entire West Wing." 5-27-44

● EQUIPMENT AND SUPPLIES. "We have at the present time 22 suction machines of which seven are out for repair. We feel that we have sufficient machines to adequately cover any emergency. All equipment in the hospital can be shifted about for the benefit of all patients.

● AUTOCLAVE. "We have five new autoclaves available in the new building as well as two in the women's building and four in the main unit." The Superintendent admitted that the four machines criticized by PV are now in repair.

● INSTRUMENTS. "Replacement for obsolete instruments and repair of instruments are arranged for routinely. The speed with which they are returned from repair depends upon company making repairs." (The Superintendent showed PV reporter requisitions for instruments yet unfilled. Instruments have been transferred from one operating room to another. "We are fully aware of the need for repairs and new instruments and continuously make every effort to have an adequate supply of instruments on hand.)

● NURSING STAFF. "Harlem Hospital compared to other institutions is in good state. Nursing staff is adequate to cover necessary operations." 5-27-44

● OPERATION PROCEDURE. "When needed, due to increase of cases, personnel can be and are reassigned to operating unit. Scheduled operations are met."

● ADMISSION TO WARDS. The hospital was charged with transferring quarantine cases to the operating room. "We are following instructions issued by the Health Department in relation to admission of children to quarantine wards."

● MORTALITY. "Statistical facts reveal no increase in mortality. No increase in post operative deaths during 1944 as compared to '42 and '43.

● ANAESTHESIA. "We have physicians administering ether. Some places have nurses. Our internes are qualified for administration of certain types of anaesthetics. Availability of physicians also influenced by war. As to the salaries paid to those who give anaesthetics, that is arranged by the budget director."

ROOM FOR IMPROVEMENT

"I fully well realize that there is room for improvement and that no institution can sit back and feel conditions are completely satisfactory. We are endeavoring to progress and improve Harlem Hospital, both as to available equipment, supplies, etc. as well as to raise the standard of medical practice as expressed by staff members. The Commissioner of Hospitals is wholeheartedly behind any plan which will serve to elevate the standard at Harlem Hospital and provide better care for the members of the community. The visiting staff, too is concerned and makes every effort to maintain good standards. The departure for war of many members of our staff has necessarily caused us to curtail luxury activities but at all times necessary clinics, treatments and facilities are provided.

5-27-44

"Shortage of lay personnel has caused us difficulties which we are making every effort to take care of. I feel that healthy criticism serves to make progress and that we of the Department will endeavor to cooperate with interested agencies."

25-1944

Alabama

No Hospital Expansion Planned For Tuscaloosa And Tuskegee

NEWS-Birmingham, Ala.
2-14-44

BY JESSE S. COTTRELL
Special Washington Correspondent,
The Birmingham News-Age-Herald

WASHINGTON — The Veterans Administration will take no immediate action in regard to expansion of the veterans hospitals at Tuscaloosa and Tuskegee, Ala., it was announced Monday.

The reason is that already an expansion program is in progress in each place with building facilities being enlarged; at the Tuscaloosa Veterans Hospital for an additional 165 beds, whereas the Tuskegee Hospital for Negroes is being expanded to add 186 beds. If the General Hospitalization Board of the Veterans Administration follows its usual policy, an arrangement will be made with the contractors on the two veterans facilities to continue the work and add the annexes that have now been authorized in addition to the work that is now being downe.

Gen. Frank T. Hines, director of the Veterans Administration and also chairman of the Veterans Hospitalization Board, states it has been found necessary to provide 6,000 beds at various veterans hospitals throughout the country for neuropsychiatric cases.

2-14-44

It was in furtherance of this program that an annex was authorized of 328 beds each for cases of this character at the Tuscaloosa and Tuskegee Hospitals.

Catholics Purchase Hospital For Race

Journal & Guide — Norfolk, Va.
2-26-44

SELMA, Ala.—(ANP)—At a cost of $34,000 the Catholics of Mobile last week purchased a group of hospital buildings for the city's Negro citizenry. The Fathers of St. Edmund will head the development.

A clinic will be opened in the hospital on Sept. 1, Father Francis Casey, head of the St. Edmund Fathers in Alabama, announced. Sister M. Anastasia of the Sisters of St. Joseph, Rochester, will be in charge.

A school and church for colored is already maintained by the fathers.

As Famed Neurologist Visited Tuskegee

Daily World-Atlanta Ga.
2-5
5-3-44
Ala

TUSKEGEE INSTITUTE — (SNS)—Dr. Solomon C. Fuller, famed neurologist and psychiatrist, was a distinguished visitor here recently and while here uaid a call at the Tuskegee Veterans Hospital. Pictured, l to r, are. Major S. O. Johnson, U. S. Army, chief of N P.. Infantry; Major Harvey F. Davis, U. S. Army, chief of the reconstruction service; Dr. Fuller, and Lt. Col. George C. Branche, U. S. Army, in charge of all neuropsychiatric activities, Veterans Administration Faculty, Tuskegee, Ala.

NEGRO HOSPITAL TO BE PART OF MEDICAL CENTER

B'ham, Ala
Weekly Review, June 3, 1944

The Birmingham and Jefferson County Hospital for which funds are being collected by the Jefferson County Negro Hospital Association founded by one Rev. Amos Carnegie, and now headed by Rt. Rev. B. G. Shaw, senior bishop of the A.M.E. Zion Church, along with the Crippled Children's Clinic, the Children's Hospital, the proposed new State Board of Health building, will be included in the new medical college center which will occupy about six square blocks in addition to the area now covered by Jefferson and Hillman hospitals.

Weekly Review, B'ham, Ala.

The inclusion of the proposed Negro hospital in this new center which will have tax funds support for maintenance in view of the tendency toward socialization of medical aid for those unable to pay for same. The Weekly Review was happy to learn that the Negro hospital will be included in the new medical center. While we have thought the effort on the part of Negroes to build a hospital for themselves was a very fine thing, we have felt that the city, county and the community was unfair to the Negro people to accept tax funds to build Jefferson and then turn to the Negroes and say if you want a hospital built ours when as a matter of fact built our when as a matter of fact all hospitals are built and operated on monies coming from all people. The building and operation of a Negro hospital with Negro money is a pipe dream. It would be a pipe dream to talk of white folk building and maintaining adequate hospitals with white money only.

6-3-44

The State of Alabama ought operate a number of clinics and hospitals throughout the state as part of a state setup.

A Great Shame Upon Us

News—Birmingham, Ala.

Recently a Birmingham man was placed in jail at the request of his family while awaiting a vacancy in the Bryce Hospital at Tuscaloosa. He died while in jail. Members of his family believe that had he been in the hospital he might have lived. That belief, of course, is not provable, but the family holds to it and the members think something is wrong when the state cannot provide proper care for all its mental and nervous patients.

Something is wrong. But the indictment is not against the hospital, or the jail, or against any officials connected with them. Rather the indictment is against the people of Alabama who, through their legislators, have not provided adequate facilities to provide for those needing care.

8-7-44

The present capacity of the Bryce Hospital is 3,300 white and 400 colored. On Aug. 1 it was caring for 3,421 white and 403 colored, or 124 patients more than normal capacity.

The Searcy Hospital (for Negroes only) at Mt. Vernon has a capacity of 1,400. It had on Aug. 1 a total of 1,557 patients, 157 above capacity.

The Partlow State School, for mental deficients, has a normal capacity of 850. It is overflowing, with a waiting list of more than 200.

8-7-44

* * *

Crowded and overflowing, the Alabama State Hospitals cannot receive all the mental and nervous patients referred to them. Between Oct. 1, 1943, and Aug. 1, 1944, the hospitals declined 302 applications for white patients and 15 for colored. There are no records of the number of mental and nervous patients being cared for in jails throughout the state while awaiting vacancies in the Alabama State Hospitals, but the number is large.

In Jefferson County between 400 and 500 mental patients pass each year through the county jail. In cases that do not call for emergency transfer to a state institution, the patient is generally transferred to the county home at Ketona, often to remain many months while awaiting an opening in a state hospital. But Ketona, while better than the jail, is not the proper place for caring for mental and nervous cases.

8-7-44

Many counties of the state do not have county homes, and consequently must keep in jail the patients for whom confinement is necessary or desirable, but for whom there is no immediately available place at Tuscaloosa or Mt. Vernon.

The policy of the Alabama State Hospitals is to maintain about the present number of patients, admitting new ones as old ones are discharged or die, thus not further increasing the population of the institutions. Some way must be provided in this policy to take care of emergency cases in which immediate hospitalization is needed.

In choosing what patients they will receive immediately as emergency cases and what patients must wait until other patients from the counties are released by the hospitals, it is inevitable that the hospitals make some mistakes.

* * *

A major mistake is that committed by the state in tolerating a situation where its mentally ill people must be kept in jail because there is no room in the state hospitals. For instead of treatment accorded to the sick, they are given treatment similar to that received for criminals. Sometimes they are not served for criminals. Sometimes they are not capable of good behavior. But at least they should not be encouraged to bad behavior.

8-7-44

There is the effect, too, upon the families. Families of mental patients should look upon them as sick, monia or appendicitis or failing eyesight, as they are sick, purely a physical disease unrelated to morals or the trouble as they would look upon pneuwrong. These have done no wrong. They have done wrong or are charged with wrong. A jail is a place for people who have done wrong or are charged with wrong. Generations ago the world reached the realization that the mentally ill are not criminals.

8-7-44

or original mental strength. But that in many cases is made more difficult when the patients must be confined in jails instead of in hospitals. 8-7-44

* * *

An indictment in this situation cannot be drawn against officials of the Alabama State Hospitals. Year after year, the reports of Dr. W. D. Partlow, the superintendent, have stressed the need for greater support for the hospitals. Every session of the Legislature has had the situation laid before it. The trouble is that the people of Alabama have not been sufficiently aroused to the need for greater support for these state institutions. Rather we continue to permit many sick persons to languish in jails when they should be in hospitals. We give them stone cells when they ask for beds in hospitals. And a great shame should be upon us.

A Great Shame Upon Us

Advertiser-Montgomery, Ala.

Recently a Birmingham man was placed in jail at the request of his family while awaiting a vacancy in the Bryce Hospital at Tuscaloosa. He died while in jail. Members of his family believe that had he been in the hospital he might have lived. That belief, of course, is not provable, but the family holds to it and the members think sometihng is wrong when the State cannot provide proper care for all its mental and nervous patients. 8-14-44

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In choosing what patients they will receive immediately as emergency cases and what patients must wait until other patients from the counties are released by the hospitals, it is inevitable that the hospitals may make some mistakes.

A major mistake is that committed by the people of Alabama in tolerating a situation where its mentally ill people must be kept in jail because there is no room in the State institutions designated and equipped for their care.

A jail is a place for people who have done wrong or are charged with wrong. These people have done no wrong. They are sick. Generations ago the world reached the realization that the mind could get sick and that persons thus afflicted needed a hospital, not a jail.

Many nervous and mental patients realize their condition. They know they are ill. They may know that in some cases there is a cure. But at least they know that their condition is not, except in a relatively few cases, the result of deliberate wrongdoing. Often they are nervous and unduly sensitive.

To commit such persons to jail because there is not a hospital bed for them puts upon them a severe shock. It is natural that their conditions sometimes are made worse. For instead of treatment accorded to the sick, they are given treatment similar to that reserved for criminals. Sometimes they are not capable of good behavior. But at least they should not be encouraged to bad behavior. 8-14-44

There is the effect, too, upon the families. Families of mental patients should look upon the trouble as they would look upon pneumonia or appendicitis or failing eyesight, as purely a physical disease unrelated to morals or original mental strength. But that in many cases is made more difficult when the patients must be confined in jails instead of in hospitals.

An indictmnet in this situation cannot be drawn against officials of the Alabama State Hospitals. Year after year, the reports of Dr. W. D. Partlow, the superintendent, have stressed the need for greater support for the hospitals. Every session of the Legislature has had the situation laid before it. The trouble is that the people of Alabama have not been sufficiently aroused to the need for greater support for these State institutions. Rather we continue to permit many sick persons to languish in jails when they should be in hospitals. We give them stone cells when they ask for beds in hospitals. And a great shame should be upon us.—Birmingham News.

State Salaries

Age Herald-Birmingham, Ala. 10-10-44

The greatest problem in caring for Alabama's insane, says Gov. Sparks, is not in the shortage of room at the state's two hospitals, although that shortage is serious, but in a scarcity of competent help. That scarcity he explained as largely due to the state's inability to pay wages and salaries comparable to what attendants and nurses can make elsewhere. The governor promises relief when the Legislature meets next May.

That is a long time to wait for help in a bad situation. The delay shows up the defects of a public financial system without flexibility for meeting changing conditions. When the Legislature makes appropriations to cover a two-year period, it cannot always foresee the changes that will come. That situation supports the argument that more leeway should be granted the executive branch of the government to alter appropriations, within limits, to meet new needs.

Care Of Insane To Be Improved, Says Sparks

News—Birmingham, Ala. 10-10-44

BY HUGH W. SPARROW
News Staff Writer

MONTGOMERY, Ala.—Relief from conditions at the state's hospitals for the insane which now make it necessary for some applicants to remain indefinitely in jails before being admitted is promised Alabamians by Gov. Sparks.

When the Legislature meets next May, the governor told this reporter, a request will be made to increase appropriations for both the Bryce Hospital at Tuscaloosa and the Negro hospital at Mt. Vernon, and if the increase is granted this additional money may solve most urgent of two problems causing delay in admitting patients.

Insane hospital inmates, he said, are allowed between $3 and $4.50 weekly under the present appropriation, and this allotment must take care of all expenses, including the cost of nurses, attendants, and guards. If the per-patient appropriation is increased, the governor pointed out, the state will be able to offer salaries which might attract greatly needed hospital help.

10-10-44

LATER ON, THE GOVERNOR DISCLOSED, buildings will be added to both hospitals. Provision for this expansion, he said, already has been made in the state's post-war reconversion program. Additional space will be provided, he added, as soon as materials and supplies, now largely restricted by priority, are available.

What the general public doesn't understand, according to Gov. Sparks, is that delay in admitting patients is due more to a lack of attendants than to lack of space.

Conditions at both hospitals, he said, are extremely crowded, but if the state had the nurses, attendants, and guards, a great many more patients could be put into buildings now in use. 10-10-44

The state, he said, is unable to compete under present appropriations with salaries paid nurses, attendants, and others at the Northington General Hospital, in Tuscaloosa, and in other government hospitals. Though every possible effort has been made to recruit new workers, he added, there seems to be absolutely no desire on the part of the public to accept employment at salaries offered at the state hospitals.

Some time ago, according to the governor, Bryce Hospital authorities virtually completed arrangements with Gen. Hershey to use a number of conscientious objectors as insane hospital employes, but the plan was nailed by the American Legion, which objected to employment of conscientious objectors in Alabama. 10-10-44

Gov. Sparks said he had read newspaper accounts of Circuit Judge Robert J. Wheeler's charge to a Grand Jury in Birmingham last week, assailing the state for failing to provide facilities for the insane, but declined to comment.

* * *

SOLDIER TO VOTE? An interrogation point quite appropriately should be placed behind that question because, as matters now stand, it is very much up in the air. Several days ago Secretary of State Sibyl Pool officially certified emblems of the Democratic, Prohibition, Republican and Socialist parties, together with the names of their nominees, to the probate judges. But it is up to those judges to decide whether to go ahead and have ballots printed, omitting the emblem of the so-called American Democratic party and the names of its nominees.

The American Democratic party was ruled off the ballot by an attorney general's opinion and by ruling of Circuit Judge Walter B. Jones, of Montgomery, on grounds that it had failed to qualify under the law in selecting nominees. Judge Jones ruled about 10 days ago, but the American Democratic party, which has indicated that an appeal would be taken to the Supreme Court, has 30 days from the time of the ruling to file an appeal. Thus far no steps have been taken. 10-10-44

CERTIFICATION OF EMBLEMS of the four other parties, together wtih names of their nominees, by Secretary of State Pool thus dropped into the laps of Alabama's 67 probate judges a tough question. These judges must decide whether to wait or go ahead and print the ballots, as certified to them by Miss Pool, and then mail them out to the many thousand qualified voters in the armed forces all over the world who have applied for absentee ballots.

The risk they face is that if an appeal is made by the American Democratic party, and the Supreme Court sunstains the appeal, any ballots without the party's emblem and names of its nominees would be illegal.

The best guess right now, however, is that the probate judges will go ahead and take a chance. Besides, there isn't much time now to mail out absentee ballots—even by air mail—to far places of the world and expect to get them back by Nov. 7.

* * *

GOVERNOR'S ANNIVERSARY—Though only a few of his close friends here and at Eufaula knew about it, Gov. Sparks passed his 60th milestone Sunday. He spent the day quietly at his home in Eufaula, as has been his custom during most of the years of his life. Until his mother died, about seven years ago, Gov. Sparks never let an anniversary pass without going to the old home and spending most of the day in her company. 10-10-44

* * *

APSC ASPIRANTS — Shortly after Jan. 1 a vacancy will exist on the Alabama Public Service Commission, caused by the advancement of Gordon Persons, Montgomery, from associate commissioner to commission chairman. (He was elected successor to Chairman Hugh White while in the midst of his term as associate commissioner). As has been in the past, the question of who will receive the appointment from Gov. Sparks continues to be a lively one here. At least four names are being mentioned. They are Fitzhugh Lee, former member for more than 20 years, unseated in 1940 by Persons; Hunt Frazier, Selma Chamber of Commerce secretary and member of the Legislature; former Speaker Harry Walker, of Athens, and Eugene Fowler, Birmingham attorney.

25-1944 California

Inter-racial hospital here to cost one million dollars

Tribune—Los Angeles, Calif.
8-14-44

Announcement of receipt of the first gift of $50,000 toward the proposed inter-racial hospital to be erected here was made last week at a dinner at the Villa Arlington by Bishop W. Bertrand Stevens of the Los Angeles Episcopal Diocese.

Plans for the hospital which will provide opportunities for internship and nurse training regardless of race or creed, call for the expenditure of $1,000,000, Bishop Stevens declared. The interest of certain citizens, including philanthropist Harvey Mudd, has been guaranteed, the churchman declared.

The dinner meeting was called by the Rev. Father H. Randolph Moore, vicar of St. Philip's Episcopal church, who traced the movement for the hospital from 1939 and described the need for the institution. This was emphasized in talks by Doctors Ruth Temple and George Uhl of the City Health Dept. and George A. Beavers, Jr., of the Golden State Mutual Life Insurance company.

Mr. Beavers was elected chairman of the committee which will erect the hospital. He appointed sub-committees.

8-14-44

A model of the 200-bed hospital proposed, with sketches, was shown by Miss Margaret Wherry, superintendent of the Hospital of the Good Samaritan.

Catholics ask full access to hospitals for Negros

12-4-44 Tribune
Los Angeles, Calif.

Full access to the city's public and private hospitals for Negro and other non-Caucasian physicians, medical students and patients was sought in one of four resolutions passed by the Catholic Interracial Council at its November meeting.

It was pointed out that most Negroes and Orientals, when needing hospitalization, are under the impression that all or most private hospitals will not accept them, even when they are able and willing to pay top rates. They obtain care in General Hospital instead, some paying cash, others obtaining credit, there having been no such thing as free hospitalization there for some years.

Few Negroes and Orientals are aCtholics, and have not known as groups that there is no racial or religious discrimination in Catholic hospitals, the Council stated.

DOCTORS AND STUDENTS

The problems of Negro physicians and medical students was seen as socially serious. There are far too few Negro physicians in ratio to the Negro population, Council members were told. Negro physicians encounter difficulties getting on private hospital staffs so as to get patients admitted for medical or surgical treatment. Negro medical students have difficulty finding clinics in which to gain experience by actual observation.

The resolution empowered Daniel G. Marshall, Council president, to secure appointments with various hospital and hospital association heads for the Council's executive committee towards promoting equality of status for physicians, students and patients, without respect to race.

Three other resolutions, all passed unanimously, asked the restoration of all loyal citizens of Japanese descent to Federal, State and County Civil Service jobs; censured the Hearst newspapers as inflaming anti-Semitism in the nature of their attack upon Sidney Hillman, and arousing racial antipathy towards Japanese-Americans; and assured a Negro family subjected to intimidation and threats because of moving into a white neighborhood of legal assistance in maintaining constitutional rights.

25-1944

D. C.

Late News Briefs

Journal & Guide
Norfolk, Va. 1-29-44

Dr. Hall New Head Of Freedmen's Hospital

WASHINGTON, D. C. — Dr. James Lowell Hall took oath of office Jan. 22, as superintendent of Freedmen's Hospital, Washington, D. C., replacing Dr. John W. Lawlah, dean of the medical school of Howard University, who had hitherto served in both capacities. Dr. Hall, since July, 1940, has been chief of staff of Freedmen's Hospital and head of the department of medicine of the Medical School of Howard University.

Dr. L. P. Hall New Freedmen's Head

Tribune - Washington, D.C.

Dr. Lawlah to Devote Full Time

1-29-44

As Dean of H. U. Medical School

Before approximately 200 employees, administrative staff, and heads of professional services, Dr. James Lowell Hall, chairman of the Department of Medicine, Howard University School of Medicine, formally took oath of office as the new superintendent of Freedmen's Hospital, at 9:15 a.m., Saturday.

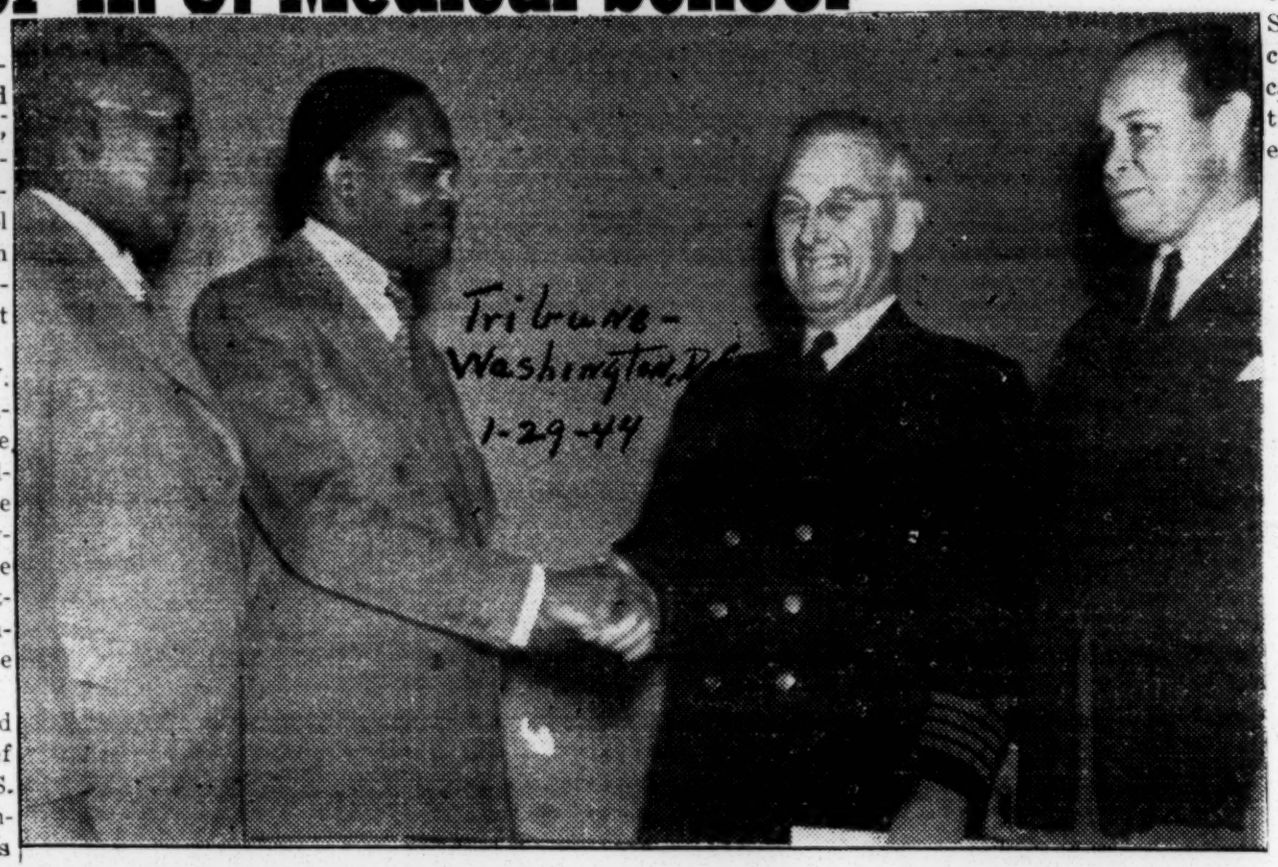
Dr. Hall succeeds Dr. John W. Lawlah, who for the past eighteen months has assumed the duties of superintendent in addition to those of dean of the School of Medicine. Dr. Lawlah, in the future, will be able to devote his entire time and attention to the mutiple duties incumbent on him as dean of the School of Medicine.

The exercises were attended by Dr. W. F. Ossenfort, chief of the Hospital Division, U. S. Public Health Service, who commended Dr. Lawlah upon his tenure and encouraged Dr. Hall in his new post.

Dr. Hall's training and successful achievement over a period of years argues for a successful career in this new appointment. A brief citation of his training and positions held include the following:

He was graduated from Rush Medical College in 1926, and following a period of internship for one year at St. Louis City Hospital No. 2, and three years of private practice, one of which he was connected with the Central Free Dispensary of Rush, Dr. Hall was granted a fellowship for study in Vienna through Provident Hospital and the University of Chicago. 1-29-44

At that time, these institutions had funds from both the Rockefeller Foundation and the Rosenwald Fund for use in training the staff to take over the professional services in the greater Provident Hospital, which opened its doors on May 15, 1933.



FREEDMEN'S GETS NEW CHIEF—Dr. James Lowell Hall, second from left, is shown receiving congratulations from Dr. W.F. Ossenfort, chief of Hospital Division, U.S. Public Health Service, Saturday, after the former took oath of office as superintendent of Freedmen's Hospital. Dr. Hall succeeds Dr. John W. Lawlah, extreme left, who for the past eighteen months had assumed duties of Freedmen's superintendent in addition to those of dean of the Howard University School of Medicine. In the future, Dr. Lawlah will devote his entire time and attention to the multiple duties incumbent on him as dean. Dr. Charles Drew, of the medical staff, is shown at right. He made presentations to Dr. Lawlah on behalf of the employees and department heads of Freedmen's—Wright-Riley Photo.

1-29-44

Studied in Vienna

Dr. Hall spent twenty months in Vienna taking special training in internal medicine. On his return to Chicago, he continued his research studies as a fellow of the Lasker Foundation of the University of Chicago. This additional period of training lasted for three years during which Dr. Hall began organization of the Department of Medicine at Provident.

In 1935, he was appointed director of the clinic Dr. Hall became head of the Department of Medicine.

In these two capacities, he worked until July 1, 1940, when he was appointed professor of medicine and head of the Department of Medicine of Howard's Medical School. Immediately after assuming his new duties, Dr. Hall was made the chief of staff of Freedmen's, which added position he held until taking over the superintendency.

Writings Circulated Widely

In internal medicine, Dr. Hall has gained distinct honors, the most important of which being his work in the allergic diseases.

Approximately a year ago, he completed the examinations given by the American Board of Internal Medicine and has since been made a diplomat of this board. This honor is shared by very few other Negroes at present. 1-29-44

His publications in outstanding journals embrace both the purely scientific field of medical chemistry as well as the more general clinical fields of vitamin deficiencies and allergic diseases.

It might well be pointed out that while in Chicago, Dr. Hall's community activities in medicine were of such outstanding character that in 1939-40, he was elected chairman of the Clinic Section, Council of Social Agencies, a very strategic post because of his direction of the particular activities in this post for entire Chicago.

28-1944

Florida

$4,000 Left To Hospital

Tribune - Savannah, Ga.
11-2-44

By Dr. C. W. Snyder of Jacksonville, Fla.

JACKSONVILLE, FLA., Oct.28 —(ANP)— Dr. C. W. Snyder who died two weeks ago, in a will dated April 6 and probated Wednesday, left $4,000 to Red Cross hospital here and $1,000 to Plymouth Congregational church of which he was a member.

The residue of the estate goes to his widow, Mrs. Berdie Snyder "absolutely and forever."

W. L. Sanders, president of the Domestics Life Insurance company, is named as executor without bond. The value of the estate is estimated to be considerable as the court set $25,000 bond for the executor.

11-2-44

Leaves Hospital $4,000 Ill.
Defender - Chicago, Ill.

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11-4-44

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25-1944

General

Negroes Run Hospital In Southwest Pacific

Call - Kansas City, Mo.

SOMEWHERE IN THE SOUTHWEST PACIFIC — (ANP) — A new station hospital fully staffed by Negro officers has been established in the Southwest Pacific. Major A. Hugh Simmins of Washington, formerly of Station hospital No. 1, at Ft. Huachuca, is in charge. He has a full complement of commissioned and non-commissioned personnel and a large group of nurses. Red Cross personnel have arrived also.

This is the second hospital which has grown out of the Ft. Huachuca experiment. During World War 1 there was not a single hospital staffed by Negroes. Negro physicians when commissioned were stationed in first-aid stations but far too often were non-coms serving as bed-pan carriers.

Under these circumstances it was impossible for Negro medical men to obtain the sort of advancement in rank which this current war has produced. The highest rank accorded during World War 1 was that of major which the now Lt. Col. Joseph Ward of Indianapolis obtained through a brief and almost accidental period of service in a hospital.

The other hospital to be staffed by colored officers was located in Liberia and headed by Maj. John West, late of Provident hospital in Chicago. This hospital is understood to have been abandoned after the center of battle moved into Italy and Sicily and Negro troops became scattered. 1-7-44

It is probable that the white soldiers in North Africa could have received no finer care nor had any greater boon than to have had this Negro staffed hospital moved up where it could have served any and all soldiers of the United States and its allies which fell under its area.

The fact that the nurses who staffed it were returned to the United States and are now stationed at Camp Livingston however precludes any such service. No word of what has befallen Maj. West and his physician associates has been received.

ROGERS SAYS:

Courier — Pittsburgh, Pa.

By J. A. ROGERS

3-4-44

Famous Londoner Makes Fervent Appeal for Aid To Ethiopian Hospital

FROM Miss Sylvia Pankhurst of London, daughter of the famous woman suffrage leader, and who led in keeping the cause of Ethiopia alive in the days when it seemed the most hopeless, comes the following letter: "Mr. Roger Baldwin has advised me to write you about the Princess Tsahai Memorial Hospital Fund. According to wartime regulations, we cannot collect direct from friends of the U.S.A. for this important purpose, but must have an agent in the U.S.A. who will send out our appeals there.

Mr. Rogers

"I am anxious to find somebody who would help in this respect and I need not point out to you the importance of this hospital in Ethiopia. It has no hospital training school at present; no ward for sick children in the whole country; only 1,600 beds for a population of 10,000,000; and less than 50 doctors lent from Britain and other countries to attend to the sick and diseased which is now at a very high rate.

"Any help or advice you can give will be greatly appreciated."

ETHIOPIANS HAVE SUFFERED MUCH AGONY 3-4-44

I feel sure that this appeal will meet with sympathetic and generous response from the friends of Ethiopia and the enemies of Fascism on this side of the Atlantic. Ethiopia was the first of the nations to be butchered and plundered by the Fascists. It was stripped clean by Mussolini and his gang, even to the monuments which were seized as trophies, taken to Rome and set up there. Never rich as Western countries go, Ethiopia was, nevertheless, self sustaining. It had no homeless, no starving, no unemployed. There was plenty of food, as well as great herds of cattle and sheep. These latter were slaughtered wholesale and sent to Italy to feed the starving there. The food would grow again but the cattle, chief wealth of the people, was irreplaceable, the result being that great destitution, suffering and disease were left in the Fascist wake.

IN SHORT, all that the conquered countries of Europe—France, Belgium, Holland, Norway—are now experiencing, Ethiopia suffered first. Thus, whenever we think of the agony of the peoples now under Hitler's heel, as we should, we ought not to forget the first victim, Ethiopia. 3-4-44

APPEALS FOR AID

I am going to suggest that all our churches, regardless of race, lodges and organizations, make a special collection and send it direct to the Hon. Treasurer of The Princess Tsahai Memorial Hospital Fund, Lord Horder, c/o Barclay's Bank, Ltd., 120 Broadway, New York City. Individuals could do the same.

THE Ethiopians, a dignified people, would be the last, themselves, to appeal for financial aid. From the days of Menelik and earlier they refused to accept loans and gifts from the European nations, knowing that such would lower their prestige and give the Europeans a hold on them. They stretch forth their hand, as Emperor Menelik said, only to God. Surely, this makes them more than worthy of our consideration. Besides this nation, which 5,000 years ago was the mother of Western civilization, has been a symbol of hope, and still is, for all peoples of African ancestry.

PRINCESS LED AN INSPIRING LIFE 3-4-44

The Princess Tsahai, eldest daughter of the Emperor, practically gave up her own life to aid the sick among her people. I first met her in 1930 on the ship that was taking her from France to her father's coronation at Addis-Ababa. She had been studying in London and was then 13 years of age. Dressed in European clothes she looked precisely like a dark colored girl such as we may commonly see in any Negro community in America.

RETURNING to London with her father in 1935, she studied nursing in the hospitals there and went back with him in 1941 to take care of the sick and the wounded in Ethiopia. Frail of build and never strong, she was advised by the doctors to give up her arduous duties at the hospital, but so devoted was she, that she continued until she finally died. Surely the example of this young princess who, had she wished, could have lived a life of ease, is an inspiration to all. 3-4-44

Correspondence relating to the Hospital Fund may be addressed to Miss E. Sylvia Pankhurst, 3 Charteris Road, Woodford, Essex, England, but contributions must be sent to Lord Horder, whose address I have given above.

Flint-Goodridge Hospital Selected As Penicillin Depot

Informer — Houston, Texas

3-20-44

WASHINGTON — A number of Negro hospitals have been included among the more than 1,000 such institutions selected as depot hospitals for the limited civilian distribution of Penicillin, the Chemicals Bureau of the War Production Board announced this week.

Included among the hospitals that should begin receiving the first shipments of the drug by May 10, are Grady Memorial Hospital, Atlanta, Ga.; Provident Hospital, Chicago, Ill.; Flint-Goodridge Hospital, New Orleans, La.; Provident Hospital and Free Dispensary, Baltimore, Md.; The Homer G. Phillips and the St. Mary's Hospitals, St. Louis, Mo.; Harlem Hospital and Lincoln Hospital, New York City; Lincoln Hospital, Durham, N. C.; St. Agnes Hospital, Raleigh, N. C.; Mercy Hospital, Philadelphia, Pa.; and the George W. Hubbard Hospital of Meharry Medical College, Nashville, Tenn.

State's Mental Hospitals Show Drop In Patients

News — Birmingham, Ala.

12-14-44

This is another story of the series relating to state departments and agencies, based on recently compiled annual reports.

* * *

BY HUGH W. SPARROW

News Staff Writer

MONTGOMERY, Ala.—Although population of Alabama's hospitals for the insane declined more than 8 per cent the past two years—principally because fewer mental cases developed in the state during the interval—Bryce and Searcy Hospital operations were complicated by an increasing shortage in help and a corresponding advance in costs.

This was disclosed by Dr. W. D. Partlow, state hospitals superintendent, in his annual report to Gov. Sparks, which declared among other things that 458 fewer patients were in the two hospitals at the close of the 1943-44 fiscal year, Sept. 30, than on the corresponding day in 1942. The number of white and Negro patients declined during that interval from 5,833 in 1942, to 5,375 on Sept. 30, 1944.

In explanation of the decline, Dr. Partlow's report commented, in part, as follows: 12-14-44

"These results, it seems to me, are apparently due to several causes. First, I am convinced there is a reduced number of mental cases developing during the past two years, possibly due to the fact that the entire population of the country is occupied. And, second, the further fact that we have been handicapped in accepting applications, particularly for white men.

"I am very definitely convinced that the improved methods of treatment during recent years has made a very positive impression on the population turnover and enabled the institutions to dismiss a considerably larger percentage of patients each year.

"Also within the past several years we have heard less of alcohol and drug addicts. We seldom have applications for either now. Both the federal government, keeping a close check on illicit handling of drugs, and efficient state regulation of whisky stores apparently have had some effect on the use of alcohol and drugs."

* * *

THE REPORT ADDED THAT the reduced number of patients had enabled the hospitals to operate within budgetary limits, despite increased maintenance costs.

Dr. Partlow pointed out further that the institutions have managed to operate in the face of increased pay rates for employes and higher

"Since the war began we have lost five of our physicians and three attendants from \$60 to dentists. This takes about half our month and women attendants medical service and all the dental to \$75. In addition to this service. We have no dentist either pay rate, the report said. at the Bryce Hospital, the Searcy and women attendants are Hospital or at the State School for ed with board, lodging and the Feeble-Minded. The only dencare provided a cottage or tal service we have is an arrange15 monthly as rent ment with a dentist in Tuscaloosa for two hours each morning at the Bryce Hospital."

* * *

THE PAY RATES AND 12-14-44

AL, costs were lower, the DESPITE DIFFICULTIES tinued, the hospitals were CAUSED BY A SHORTAGE OF t aside as much annually PERSONNEL, the report continued. taining property as was all applications for white women. on the hospital farms, Negro men and women have been airies, etc. In more re- accepted "except for a small num- it was pointed out, ber of those apparently not suitable been nothing left for the for the hospitals, such as are bedkeep of property." The ridden, helpless, nursing incurted further that at pros- ables."

The greatest number of applicants and mechanics not accepted have been white operation and "very minor men, the report added, but the hospital has indicated to all probate this reason that prac- judges "that we would make an buildings are in need of effort to accept all emergency novation and renewal of cases, or those who are trouble- Dr. Partlow said. some and unmanageable, at home or in the counties."

"Our greatest difficulty has been lost considerable of our sonnel," his report add-

WHEN THE MATERIAL, co report continue able to set asi for maintainin produced on t gardens, dairies cent years, it "there has been care and upkeep report asserted f ent the policy enough carpente for daily operatic repairs." is pursu

"It is for this tically all buildin complete renovat equipment." Dr.

"We have lost c medical personnel

the medical department at Bryce Hospital where we have been so short of male and female attendants," the report declared. "By employing selected patients as attendant helpers on the wards, however, we have managed to get along without disaster or serious results. We have about 100 patients so employed at Bryce Hospital."

* * *

FARM PRODUCTION OF THE HOSPITALS during the past year "will show up well despite unseasonably wet weather for a time and then a drought," the report added. Sale of cotton and cotton seed amounted to $31,625 for the Bryce Hospital. In addition, it was declared, the two state hospitals, as well as the School for the Feeble Minded, produced ample corn for bread. 12-14-44

During the 1943-44 fiscal year the state hospitals received from all sources $1,289,946, including state appropriations aggregating $1,159,313. Expenses at the Bryce and Searcy Hospitals amounted to $1,285,220.

Populations of the hospitals on Sept. 30, 1944, included 3,426 white patients, of which 1,596 were men and 1,830 women, and 1,949 Negroes, 951 of them men and 998 women.

Dr. Partlow's report, in conclusion, commended "officers of the hospitals and those employes who have remained with us" and added that "we shall continue to carry on as best possible, hoping that when the war has ended we may begin again to run normally."

SYDENHAM'S PLAN

Age—New York, 11-4

LAST week, Harry C. Oppenheimer, trustee of Sydenham Hospital, speaking on a race relations program at one of the sessions of the annual meeting of the National Committee for Mental Hygiene, declared that "non-discriminatory hospital service" at that institution had worked successfully beyond expectations.

The Sydenham experiment, he said, has proven satisfactory to its doctors, nurses, families of patients, and to the public. The only variant viewpoint, he said, had come from the N.A.A.C.P., which disagrees as a matter of policy and not prejudice, because the NAACP feels it is better to work toward the admission of Negro doctors on the staffs of all New York hospitals. 11-11-44

"Our organization has met with the NAACP and we have thoroughly discussed our differences of opinion," said Mr. Oppenheimer. "Without animosity, we have agreed to disagree for the present. So far we have seen no evidence of their fear of 'jim crowism'."

"Sydenham is the first inter-racial hospital in the United States and for this original circumstance, the organizing staff has been particularly aware of the basic attitudes among the workers and patients of the hospital," said the speaker. "These people are principally from the colored and white races. We, also, have among our personnel a Chinese research man and a Japanese receptionist. The hospital is planned for all races but the neighborhood location brings to us mostly Negro and white people."

11-11-44

"It is conceded that there is no color line among very young children," Mr. Oppenheimer continued. "It is also conceded that there is no color line among adults who are absorbed in work to a degree of intense and self-effacing concentration. It is no wonder, then, that among the doctors of different races, working together on scientific research and ministering to sick patients in emergency, there is a minimum of consciousness of racial difference. This condition, also, applied to the nurses who supplement the work of doctors in close association, as well as technicians, laboratory workers, and other hospital personnel.

"But these same doctors and nurses, when once out of the absorbing demands of the operating room, sick room, and laboratory, revert to every day social relationships of average people. We were encouraged way beyond expectation when we saw how this mutual social association worked out. We have one dining room for all workers and several recreation rooms on the same basis. It is these social relationships that have been particularly gratifying to us. It is this personal friendship that is made possible at Sydenham by bringing people of various races together in an environment where they can really come to know one another. And the environment has produced just this.

11-11-44

"Certainly sick people are not at their best but so far our experience has been as favorable among our patients as among our staff. Through a combination of natural compassion, absorbing interest in their wrk, and wise indoctrination, our staff gives patients a fine reception. And this good start is as contagious as some of the germs that we encounter."

The New York Age agrees that only by working together and being together can various races work out the solution together. The so-called Negro problem is not a Negro problem; it is a white problem. It is a problem because white people have chosen to set Negroes apart. When they let down the barriers and men of good will of both races get together, the problem soon resolves itself and is easy of solution. 11-11-44

Other hospitals can look at what has been done at Sydenham Hospital for an example of interracial understanding and cooperation. It has been done at Sydenham. It can be done elsewhere, if other hospitals want it to be done.

DOUGLAS HOSPITAL GETS SECOND FWA GRANT; START NEW BUILDING

Plaindealer-Kansas City Kans.

An additional $26,000 allotment has been granted by the Federal Works administration for the construction of the new Douglass hospital, Representative E. P. Scrivner of the second Kansas district notified the Plaindealer this week.

The additional allotment brings to $126,000 the government's share in financing the new hospital. The original FWA allotment was for $120,000. The African Methodist Episcopal church, owner of the hospital, with the aid of a city wide movement, raised $44,000 for the building fund in a drive conducted a year ago.

Construction of the new hospital, to be erected at a cost of $190,000, was begun last week. The completion date is currently scheduled for March 1. The building will be of red brick and will have a 50-bed capacity. It is located at Twenty-seventh street and Grant avenue.

The present Douglass hospital, at 336 Quindaro boulevard, contains normally sixteen beds, although twenty to twenty-five patients can be cared for at a time when necessary, Miss Frances Kitchen, superintendent, said.

25-1944

Georgia

Grady Nurses Stage Brief

Daily World — Atlanta, Ga.

Strike Over "Poor" Food

8-4-44

Agree To End Demonstration After Promise Of Better Preparation

BY SPIKE WASHINGTON

(World Staff Writer)

In the midst of a controversy as to whether Grady Hospital will continue the Negro nurse trainee program after September 1, 1944, student nurses of the hospital walked out on strike Thursday noon in protest of what they claimed to be "poor" food, acording to a report made to the WOLRD shortly after the demonstration, the report was later confirmed by the office of the Acting Superintendent of Nurses at the hospittal, Mrs. Carrie M. Logan.

8-4-44

The strike was short-lived, the student nurses agreeing to return to their duties shortly following walkout, and after a group of the nurses had conferred with hospital authorities it was stated.

The Superintendent's office, thru Mrs. Mazur, Graduate Nurse in charge, during the absence of Miss Logan, told a WORLD reporter that "there had been a misunderstanding between the nurse students and the administration resulting from food served at dinner time Thursday, but shortly afterwards an adjustment was made to the tastes of any of the group it was prepared for, and was of far less grade than that served the white student nurses at the hospital, in preparation, quality and quantity, according to statements made to this paper by trainees.

During the walkout it was revealed that the trainees marched from the dining hall, leaving the food as it was, and milled around their nurses' home outside Butler street in protest. Shortly after hospital authorities learned that the nurse students had become dissatisfied over their menu they got together with the trainees and perfected a plan whereby better food would be served, which brought about an understanding between the two groups. It was then that all of those on strike returned to their classes and their duties at the hospital according to the statement made to the WORLD by a student group which visited the office shortly after the strike and before the nurses returned to their posts.

TO WATCH FUTURE MEAL

In visiting Grady hospital, and making entrance to the home of the nurses the WORLD reporter found the girls on duty, and those off engaging themselves in recreational activities in the home during their off periods. Several of the young women expressed that they would keep their "eyes peeled to see what improvements will be made in our meals." 8-4-44

In the meanwhile, the office of the Superintendent of Nurses feels confident that all will be well with the hospital and the nurses and that there is not seen presently, any reoccurence of the dissatisfaction and demonstration of Thursday noon. The office of the Superintendent was not reluctant to furnish the information relative to the strike, gladly cooperating and was courteous in its treatment of the press, there being no indignation shown when approached on the matter.

between the parties concerned and all of the trainees are back at their posts of duty perfectly satisfied." Mrs. Logan was away from her office when the WORLD reporter went to her office for a statement relative to the strike. 8-4-44

It was learned that the students who had been complaining of poor and insufficient food for the past several weeks, staged the walkout strike demonstration Thursday at noon when their dinner was served, consisting of pickles, ham skin and fat, sliced tomatoes, boiled onions and iced tea. The spokesman for the student group told the WORLD that the dinner was not properly prepared and was not satisfactory

This Must Not Happen

Constitution — Atlanta, Ga.

No matter how deplorable conditions may be which prompted their action, the State Board of Examination of Nurses for Georgia will find it difficult to justify their ruling that Grady hospital must not accept Negro student nurses for the classes to open in September.

The ultimate result of that ruling would be closing of the Negro units of the hospital. If this were done Negroes of Atlanta would be almost without hospital accomodations, a tragedy which must not be permitted to come about. 7-30-44

Reason given for the drastic action is lack of healthful housing facilities for the Negro nursing students. There is, admittedly, urgent need for better quarters for these young women. In fact the Grady board of trustees has long sought funds for erection of a new Negro nurses' home. A recent application to Washington for $400,000 for this purpose has been turned down.

Owing to material and labor scarcity, new building in time of war is extremely difficult, if not impossible. No one is more anxious to secure a new home for the nurses than the board of trustees of the hospital. That they will do this as soon as conditions permit goes without saying. In the meanwhile it would seem that conditions, though doubtless bad, which have existed for some years, could be borne a little longer, in view of the need.

Whatever happens, Negro hospitalization must not be denied in such a city as Atlanta.

Arnall Declines To Iniervene In Dispute Over Grady Order

Constitution Atlanta, Ga.

7-29-44

Gov. Arnall has declined, in a letter to Mayor Hartsfield, to intervene in a dispute between the state nurses' examining board and the trustees of Grady hospital over an order of the board instructing Grady not to accept new Negro student nurses for the term beginning September 1 unless "healthful housing facilities" have been provided.

Arnall said yesterday that the board of nursing examiners has full authority in the matter.

In the letter to the mayor the governor suggested that city officials, Grady hospital trustees, and members of the nursing examiners' board hold a conference to smooth out the difficulties.

Arnall said he had been informed the board had not ordered construction of a new building for a nurses' home, but had merely demanded that conditions be improved and adequate accommodations for nurses and student nurses be provided.

NO JURISDICTION

"I positively state that I have no jurisdiction or control in this matter," Arnall wrote. "This board is created by law and charged with certain duties, and I, as Governor, cannot attempt to control or operate the nursing examiners' board. When I appointed the members of this board, my duties and responsibilities passed to the board."

The Governor said he understood the board is most anxious to co-operate and assist Grady hospital and the city. He said he believed the matter could be easily adjusted by conference.

The Governor's position was disputed yesterday in an oral opinion given by Asst. City Atty. Bond Almand.

"The state board of examiners of nurses for Georgia is without legal authority to force Grady hospital to refrain from accepting Negro student nurses for the term beginning September 1," he informed Frank Wilson, Grady superintendent. 7-29-44

In the meantime, Thomas K. Glenn, chairman of the Grady board of trustees, which administers the Negro unit, operated by Emory university, is seeking a conference with Gov. Arnall to protest the examining group's action.

"UNFAIR" ACTION

Action of the examining group was announced Thursday night by Wilson at a meeting of the Grady board, and it was branded as "highhanded and unfair."

The crisis arose when the nurses' examining board surveyed the Negro nurses' home at Grady, and ordered that no additional Negro student nurses be enrolled until "healthful housing facilities" have been provided. 7-29-44

Until a new home can be provided, the nurses' group suggested that modern and adequate quarters for student nurses be acquired nearby. Wilson said he had attempted to procure several units in the Henry Grady low-cost housing development adjacent to Grady, and had been unsuccessful. He said none others are available in that section of the city.

The Grady board, Mayor Hartsfield and other administration leaders have sought federal aid in constructing a new, modern and adequate Negro nurses' home at a cost of $400,000, but thus far have failed.

Help the Negro

Editor, Constitution: I note what you have to say in this morning's Constitution about the "Negro Nurses' School," and I say that, as Ben Tilman said by the Democratic party, if that school for Negro nurses is abolished, the abolishers will play the "damn-fool at the wrong time." Pardon the seeming profanity, but there is no other way to express any such action. Constitution Atlanta, Ga.

I am 78 years old. I know the Negro. I like him. He's been my friend ever since I was born. He is yet. And I am his friend. And after all this furore about racial equality and voting, the water is only being muddied. It is time for us to stop fighting menaces and fight to really help the Negro. The great hope for the Negro is to put him where he can paddle his own canoe. 8-3-44

The best thing Georgia can do is to provide Negro nurses, Negro doctors, Negro lawyers, Negro teachers and let these qualified Negroes uplift their own race to a point where they can take care of themselves. One qualified Negro teacher can do more to uplift the race than 40 arguing politicians

GEORGE B. CULPEPPER SR.
Atlanta, Ga.

$400,000 Granted Grady For Negro Nurses' Home

Constitution — Atlanta, Ga.

A $400,000 federal grant for construction of a new Negro nurses' has been averted, and Grady hospital has been approved and the threat that now continue to operations of the Negro unit might be curtailed because of lack of adequate housing facilities at the institution has vanished.

Federal Works Agency officials announced the grant yesterday, Hartsfield, the Grady board, Wilson greeted in Atlanta byson and other administration leaders. Hartsfield and Frank Wilers have attempted to obtain new Mayor Hartsfield superintendent, withquarters for Negro nursing students at a "very grave crisisdents for many months. The announcement yesterday paves the way for the lifting of a ban on

enrollment of additional Negro nursing students at the hospital, which the Board of Examiners of Nurses for Georgia imposed two months ago.

Work on the project will be begun immediately, and it will be rushed to rapid conclusion, Wilson said. 9-15-44

The crisis over continued use of the old quarters, in which 138 student nurses are housed, came about two months ago when the nurses examining board ordered Grady not to receive applications for students for the new term.

Headed by Thomas K. Glenn, board chairman, Hartsfield and others, the board appealed for time to complete the efforts to obtain federal aid. Hartsfield and Wilson made a trip to Washington last week to accelerate the application.

The new home will provide living quarters for 180 nurses, and will be one of the best equipped nurses homes in this section of the county. It will have classrooms laboratories and other facilities regarded as important to meet modern training needs.

Hartsfield was notified of the approval of the project in telegrams from Sen. George and Con Ramspeck. 9-15-44

When it appeared that no new student nurses would be allowed to train at the Negro unit, Wilson announced that it would cost the city approximately $200,000 a year to hire graduate nurses to replace them even if the graduates could be found at this time.

Hartsfield and other administration leaders said that extra cost for operation of the unit would be prohibitive and that curtailment of services was the only other alternative if the order were enforced.

After several conferences, it was decided to withhold enforcement pending outcome of new negotiations.

Wilson yesterday had a letter from the board of examiners praising the Grady board of trustees, city administration leaders and the hospital management for their co-operation.

CHARITY HOSPITAL

Tribune - Savannah, Ga.

For the sake of the record, we submit that Charity Hospital was begun in the building which now is used as the nurses' home, and was never situated on Henry Street in the house where the late Dr. W. C. Blackman resided 10-19-44 With all due regard for the many white and colored people who devoted much time and thinking to make possible the present institution, the omission of the names of certain people, white and colored, even in a brief story would not do justice to the long and patient labor which terminated in the splendid institution now known as Charity Hospital. No account of the history of Charity Hospital is faithful to the record which omits the name of Mrs. Lucy A. Lucas who gave much of her active life in this community to attracting friends to the cause of providing hospital service for sick and suffering Negroes, and furnishing opportunity for Negro physicians to give to their patients the benefit of their professional skill. Such families as the Semmes, Billings, Weeds, Comers, and Drs. T. J. Davis, J. Walter Williams, S. Palmer Lloyd are among the pillars of Charity Hospital. We realize that a brief story could not include many other persons who labored unceasingly to bring to realization their hopes of many years. The history of Charity Hospital will be written some day and it will include the names of all those who contributed to the consumation of the ideas they worked for, but did not live to see.

Above all, Charity Hospital owes its incipiency to one little lady, still in life, who conceived the idea of having a training school for nurses, realized in the McKane Hospital and the Training of Nurses beginning at Liberty and Montgomery streets, the present site of the Citizens and Southern National Bank, resulting in the forming of McKane Hospital in the two story frame building, 36th and Florence streets, named for that progressive physician, Dr. Cornelius McKane, and Mrs. Alice Woodby McKane. It was afterward changed to Charity Hospital and Training for Nurses.

New Negro Hospital Facilities Will Be Opened for Inspection

New facilities for Negro patients at the Macon hospital, which are being provided through construction, renovation and purchase of new equipment at an estimated total cost of $125,000, will be opened for inspection tonight at a barbecue being given by the Macon Hospital Commission.

Plans for the barbecue were outlined yesterday by W. C. Turpin Jr., commission chairman, who said that it is being given in honor of "the faithful Negro employes of the Macon Hospital." The barbecue is to be held in the new Marie Ragan wing of the hospital, with the colored workers, members of the citizens' committee charged with selection of a name for the new colored wing, and other Negro leaders as guests.

OTHERS TO ATTEND

Also present will be the members of the Macon Hospital Commission, the members of the board of water commissioners, Dr. Ed Cook, Judge Mallory Atkinson of Bibb superior court, Bradus Willingham, Dr. J. C. Anderson, Dr. O. H. Weaver, P. L. Hay, Mayor Charles L. Bowden, Chairman Calder Clay of the Bibb county board of commissioners; and Macon physicians who are associated with the work of the Macon Hospital.

The barbecue is to be held in the out-patients clinic on the ground floor of the newly completed Marie Ragan colored wing of the hospital, and is scheduled to begin at 7:30 p.m.

Projects to provide modern, adequate and well equipped facilities for Negro patients at the Macon hospital have been in progress for more than two years through the Macon Hospital Commission.

SUMMARIZES WORK

In summarizing the work which has been done along this line, the commission chairman reported yesterday that approximately $125,000 has been expended on the project, and that the commission believes the new facilities for colored patients "will be a credit" to the Macon hospital.

The Marie Ragan wing, constructed as an addition to the hospital, and the completely renovated Negro ward which was already in use at the hospital, now provide all essential facilities, the chairman reported. New equipment for the entire wing has been purchased, and new furnishings will be installed throughout, Mr. Turpin said. All of this equipment has not yet arrived, but it will be put into use as soon as it is delivered, he reported.

The facilities which the Marie Ragan wing will provide for Negro patients include private rooms for both men and women; a children's ward; operating room; delivery room; sun porches; men's ward ;women's ward; semi-private rooms; and diet kitchens. There is also an out-patient clinic for treatments which do not require hospitalization.

Members of the Macon hospital commission include W. C. Turpin Jr., as chairman, Dr. C. L. Pennington, H. N. Mitchell, Mayor Charles L. Bowden and Calder B. Clay.

25-1944

EQUIPMENT OF OLDEST NEGRO HOSPITAL BROUGHT UP TO DATE

Public Inspection of New East Wing at Georgia Infirmary to Be Held Soon.

March 1944

Though the oldest negro hospital in the country at least research has brought to light no older one, the Georgia Infirmary is by no means old in the sense of equipment and progress.

A tour of the institution, preceding the opening of the new East wing, which has been completed and in use for many months but not yet had its formal opening, reveals the last word in up-to-date furnishings and equipment. The date of public inspection will be announced in the near future by Dr. C. Fullmer Holton, who is medical director for the institution.

In the program of the new wing addition, the whole hospital has been redone. Unusual feature in the operating room added in the surgical wing is the water conditioner which eliminates the calcium scale on instruments caused by sterilizing. The water conditioner increases two-fold the life of the operating instruments. The powerful lights—one for concentrated operations and two complicated electric systems for work when two or three pairs of hands are operating at once—are new.

The spotless kitchen has been completely re-equipped with such modern time-saving devices as potato peelers, dish washers, automatic grease depositories, new sets of china, modernistic refrigeration system, new range and implements too numerous to enumerate.

In redecorating, the walls and floors have been painted, new beds for the entire building installed.

In the X-ray room, a combination X-ray and fleuroscope machine, darkroom accessories, table which may be moved to get X-rays at any angle have been added. The walls in this room contain berium to prevent the dangerous rays from getting outside and the door is lined inside with lead.

The plaque in the new East wing reads "This wing was erected to enlarge the humanitarian service of the Georgia Infirmary to our negro citizens, 1942-43."

Included in the new wing is the nursery with 15 bassinets and the maternity ward. Last word in equipment for the care of infants is the Davidson incubator donated by the Porter Aide Society of which Mrs. Jack Kay, Jr., is chairman. The incubator, air-conditioned unit with built-in stethoscope, oxygen signal and alarm, humidifier and hand ports to insure sterile handling, in other hospitals has had astounding results in saving the lives of premature babies. The society also donated heated bassinets and children's cribs. In 1940, they furnished the delivery room.

Before the new wing was added and a general shifting around undergone, the hospital could handle 67 patients. Now they are in a position to take care of 89 adults, 5 children, 16 infants or a total of 110 under normal circumstances. A reserve of 10 or 15 beds, completely equipped, are held for emergencies or disasters.

Officials of the infirmary say the colored people are grateful and highly co-operative patients. They enjoy the companionship of the wards rather than the seclusion of the private and semi-private rooms. On Sundays visitors are literally lined up, and the patients have plenty of company on week-days.

The remarkable thing about the Georgia Infirmary is the spirit of the very small staff which the infirmary maintains. Bertha Marmon, the cook, who has become practically an institution in herself, cooks for the whole staff and the patients, taking care of special diets and doing the work that would ordinarily take three or four cooks.

Miss Wilma Lee, hospital superintendent, and Miss Evelyn Griffis, head of surgical nurses, have the same "pitch in" spirit, sometimes working around the clock at all sorts of jobs if the need arises. Miss Frances Stevens handles the office and clerical work. Most of the fifteen colored nurses received their training in the nurses school which until a few years ago was conducted by the infirmary. Seven maids, two orderlies and a janitor complete the staff. The versatility of the whole staff keeps the place going in spite of a shortage of help.

The same voluntary spirit has made the Georgia Infirmary an organization which has never been forced to ask for help by a public drive or campaign. Contributions yearly from the county, Benevolent Society and from individuals even up matters. Most patients are discouraged from being charity patients, for the sake of their own morale.

The city gives a small sum per day for each charity case. For a month at a time a local doctor takes care of the charity patients. The hospital has no resident doctor at the present time. Charles Maclean, one of the board of trustees, says the hospital is noted for its low cost of operation, the small overhead enables it to function with the newest and most efficient apparatus at a minimum expense.

Officers of the infirmary are H. Wiley Johnson, president; Stephen N. Harris, vice president; Jacob Gazan, secretary-treasurer. Dr. Thomas J. Charlton, Fred Wessels, M. Maclean, Julian A. Space, Jr., Malcolm Bell, Nephew K. Clark, George A. Mercer, Jr., James H. Harrison, comprise the board of trustees. Dr. Holton is medical director.

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Georgia

Grady Tops All Hospitals

Daily World - Atlanta, Ga. 1-23-44

In Number Of Race Nurses

Total Of 172 Now Enrolled In U. S. Cadet Nurse Corps

WASHINGTON, D. C. — (SNS) — With 172 students enrolled in the U. S. Cadet Nurse Corps, the Grady Memorial Hospital of Nursing, Atlanta, Ga., tops the Nation's Negro nursing schools in corps membership, according to a tabulation made January 15, 1944, by the Division of Nurse Education of the U. S. Public Health Service, Federal Security Agency.

There are 32 Negro schools of nursing in the country. Of these, 21 have applied for participation in the U. S. Cadet Nurse Corps program. Eighteen have been approved; the applications of the other three are other three are pending. Additional applications are expected. Approximately 1,500 cadet nurses have enrolled in the approved Negro schools of nursing since the inauguration of the program last July. It is estimated that the total will be rollment figures for February, 1944 classes are tabulated 1-23-44

HELPING COUNTRY

"Negro women serving in the U. S. Cadet Nurse Corps are contributing valuable service to their country," Dr Thomas Parran, Surgeon General of the U. S. Public Health Service, said this week. "Not only are they experiencing intense satisfaction by being able to minister to human beings in need now, but by preparing to play a vital part in the post-war peace to come, they are making a lasting contribution to the advancement of the Negro race."

Equipment of Oldest Negro Hospital Brought Up To Date

Tribune - Savannah, Ga.

PUBLIC INSPECTION OF NEW WING TO BE HELD SUNDAY

4-13-44

From Savannah Morning News

Though the oldest Negro hospital in the country, at least research has brought to light no older one, the Georgia Infirmary is by no means old in the sense of equipment and progress.

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Macon, Georgia
Daily World

To Get Hospital
Atlanta, Ga.

Oliver T. Ray, Regional Director of the Federal Work Agency, announces that he has concurred in the award of a contract by the City of Macon, Georgia, to the Nonnemaker-Clayton Construction Company of Atlanta, for the construction of additions and renovations to the Macon Hospital, to provide additional facilities for Negro patients. 7-7-44

he contract is in the amount of $29.469. Construction will begin on July 1, and work is scheduled to be complete within 120 consecutive calendar rays.

The funds for this project are being provided by the Government under he provisons of the Lanham Act.

GEORGIA INFIRMARY OPENING
Tribune-Savannah, Ga. 4-15-44

There will be a formal opening of the new wing of the Georgia Infirmary Sunday afternoon. To this opening our citizenry should show appreciation by attending. It is a far step from the Georgia Infirmary that the old citizens know to the present more modern building and equipment. In early years those in charge did what they could to ameliorate the condition of the patients. Improvement was made with time. Today the infirmary is about up-to-date, made so by the members of the board in charge whose interest in our people is unabating. Some of the present members of the board are connected with other movements for uplift of the colored people. We want them to know that we appreciate their connection and will show it by our presence on Sunday. 4-13-44

Negro Hospital Wing To Be Opened Soon
Constitution Atlanta, Ga.

SAVANNAH, Ga., March 30.—Preparations afoot for the formal opening of a new wing recently added to the Georgia Infirmary, said to be the oldest Negro hospital in the United States, directed attention toward this unusual institution.

The Georgia Infirmary was given a charter on Christmas Eve in 1832. 3-31-44

The whole hospital was renovated while the wing was being built. Its equipment has been entirely modernized and can care for 89 adults, five children and 16 infants. There are 15 colored nurses. Seven maids, two orderlies and a janitor are employed.

It was for the purpose of caring for aged and afflicted slaves that the Georgia Infirmary was established in 1832. During the War Between the States all the improvements were swept away when a federal commander took over Savannah. 3-31-44

All that remained when the Union troops left was the tract of land, originally granted by Thomas F. Williams. But when the war was over the infirmary was rebuilt.

Negro Nurses' Home Sought
Constitution Atlanta, Ga.

BY HERMAN HANCOCK.

Federal funds for construction of a $400,000 new Negro nurses home at Grady hospital will be sought by Alderman Ed A. Gilliam, chairman of city council's finance committee, and Frank Wilson, Grady hospital superintendent. 6-8-44

They will leave today for Washington to interview Senator George and Russell, Congressman Ramspeck and Federal Works Agency and other federal officials to obtain allocations to replace present inadequate Negro nursing facilities.

Federal funds were made available several months ago for erection of a new nurses' home for whites. Gilliam said the city can not remain on a firm fiscal basis and provide the $160,000 demanded by federal agencies as a matching fund for construction for the Negro home, and expressed confidence that when the city's financial plight is recognized, the money will be made available to help meet an existing emergency in the training of Negro nurses.

The state nurses' board has provisionally approved the Negro nurses' home at Grady, and has ordered the hospital not to acept any new applicants for training for the forthcoming term because of the "deplorable physical condition of present housing facilities." Gilliam said the demand for nurses is increasing steadily and he is confident the federal agencies will assist in any way possible. 6-28-44

Progress In Nurses' Home Move Noted
Daily World Atlanta, Ga. 6-24-44

If the $400,000 sought for the purpose of erecting a home for Negro nurses of Grady hospital is forthcoming then Atlanta can boast of the finest and most expensive home for nurses in the southland, and for that matter in the country.

Sormal and detailed application for FWA funds to erect a proposed new Negro nurses' home is probably already filed in Washington. Earlier this week Superintendent Frank Wilson of the hospital stated to the hospital trustees that the application would be filed shortly.

Stating that preparation of the required data was progressing nicely, Wilson said that when Grady meets FWA requirements approval of the project is believed to be only a formality. He said he and Alderman E. A. Gilliam, council's finance committee chairman, were assured every cooperation on a recent trip to Washington. 6-24-44

On Thursday night board members of the local hospital inspected the $162,000 white nurses' home whic his expected to be ready for occupancy on July 15.

Another proposed service for Grady was also announced. Wilson was authorized to offer a barber free quarters at Grady if he would give patient necessary tonsorial service. The superintendent expressed the belief that the arrangement would be a fine thing for all.

NEGRO HOSPITALS HERE ARE APPROVED
Savannah, Ga. Press

WILL PARTICIPATE IN MATERNITY AND INFANT CARE PROGRAM
7-10-44

The Georgia Infirmary, Station Hospital at Hunter Field and the Charity Hospital have been approved by the Georgia Department of Public Health for participation in the Emergency Maternity and Infant Care Program for the wives and infants of colored men in the armed forces, according to information received here.

The Georgia Infirmary was inspected by Dr. Edwin R. Watson, director of the Division of Maternal and Child Health, and approved for participation on June 28.

"The Georgia Infirmary met all requirements for approval under the Emergency Maternity and Infant Care program and I am of the opinion that the hospital is doing creditable work," Dr. Watson said after the inspection.

A preson wishing to make application can obtain forms from the local health department, the Savannah Chapter of the American Red Cross or from station hospitals of military posts. Both the applicant and the physician must sign the application form. When completed, the form should be sent to the director of the Division of Maternal and Child Health, Room 320, State Office Building, Atlanta 3, Ga. 7-10-44

The plan provides for selection of the physician by the patient. It is pointed out, however, that this does not mean that all physicians will desire to render the needed service at the minimum rate allowed.

Payments will be made to the physicians and hospitals according to agreements made with them. Service will be provided without cost to the family and without financial obligation by the Georgia Department of Public Health. Authorization for medical care and hospital care will be made by the attending physician. The Georgia Department of Public Health will not accept payment from the patient or family for services authorized. Attention is called to the fact that the funds can not be used as payment for more expensive hospital care than is recommended.

NEW HEALTH CENTER—This old Atlanta home at 186 Sunset avenue, N. W., was dedicated "to the very good health" of Negro members of the community at ceremonies yesterday afternoon. Established as a venereal disease clinic, it is expected eventually to include all health services.

Constitution Staff Photo—B. W. Callaway.

Newest Health Center Has All-Negro Staff

Constitution - Atlanta, Georgia, 7-17-44

By CELESTINE SIBLEY.

The smell of new paint was fresh upon the morning air and somewhere in the back a carpenter's hammer rang with steady, rhythmic strokes as the little group of doctors finished their tour of the sprawling, old-fashioned dwelling, now given over to antiseptically clean examining and treatment rooms.

Dr. James F. Hackney, assistant city health officer, drew up in front of the office of the white-coated Negro doctor-director and mopped his brow with pride and satisfaction.

He had looked on Atlanta's newly dedicated Westside health center and seen not only an old house with $16,000 worth of repairs and equipment added to it, not only a tremendous addition to the city health department's overcrowded clinic facilities. More than that, Dr. Hackney had seen a new proof of something he and other public health officials believe in strongly: 7-17-44

"Education is the foundation of public health."

The overworked phrase, "Let the people know," is a living one to Dr. Hackney and his colleagues in public health because they have learned that public health depends absolutely on the public's attitude and desire for improvement.

CENTER DEDICATED

The Westside health center, which several score white and Negro citizens dedicated yesterday afternoon, at 186 Sunset avenue, N. W., on the magnolia-shaded grounds of the old Breitenbucher home, is the direct result of an educational program undertaken by the Negro leaders of Atlanta two years ago; a program, Dr. Hackney said, which "far surpassed any expectation."

Venereal disease, taking a heavy wartime toll from both races, had the attention of the nation, and the Atlanta Urban League, a Community Fund organization for the betterment of conditions among Negroes, decided to turn its sights against the disease among its own people.

"We knew," recounted one leader, "that there was a higher rate of preventable diseases among our people—and a higher death rate, too. We also knew that germs don't know the difference in race and it was up to us to assume as our civic responsibility the group closest to us."

BUSY GROUP

Already up to its elbows in the task of getting babies to well-baby clinics, getting them immunized against diphtheria, whooping cough and smallpox, the Urban League set out to find why the venereal disease clinic on Hunter street lost so many Negro patients after the first visit or two. They conducted a survey which resulted in the recommendation for more clinics and increased use of Negro personnel to treat Negro patients. Meanwhile, students in the Negro junior and senior high schools were competing for $50 and $25 war bond prizes in an essay contest on the subject of venereal disease.

Movies were being shown at community houses and in school auditoriums emphasizing the dangers of venereal disease, and churches conducted campaigns to get their members to have blood tests made. A committee went to work to get the schools to add new science courses and present the facts of sex hygiene, and the Social Planning Council, along with 50 other civic groups and more than 200 individuals, approved the establishment of an all-Negro clinic.

Because Lanham act funds were available for the treatment of venereal diseases, the Westside Health Center was established for that purpose but both city health officials and leaders in the Negro community hope eventually to see the addition of well-baby services, tuberculosis and dental clinics and pre-natal services. They already have some of the equipment needed in their spacious examining and treatment rooms.

The Federal Works Agency supplied the funds for repairing and equipping the building and an additional $29,000 will be spent by the city and state health departments for personnel and operating costs. The first completely Negro-staffed clinic in the state, the Westside Health Center is directed by Dr. W. A. Mason, a venereal disease expert assigned to the state by the United States Public Health Service.

A native of New Orleans, Dr. Mason is a graduate of Meharry Medical College in Nashville, where he later served as chief of the venereal disease department. His staff of four Negro doctors includes one classmate and two former pupils of his at Meharry. The staff also includes four clinic nurses and three public health nurses who follow up clinic visits with trips to the patients' homes. The clinic, which is already treating an average of 30 patients a week, will be open from 10 a. m. to noon Monday, Wednesday and Friday, from 4 to 6 p. m. Tuesdays and Thursdays, and from 6 to 8 p. m. Wednesdays.

"Negroes Succeed In Georgia"

News—Savannah, Ga.

6-25-44

Georgia Infirmary

A Most Unusual, Extraordinary, Unique, Arresting Experiment and Laudable Demonstration of What White People Will Do for Underprivileged Colored People In the Deep South.

BY BENJAMIN F. HUBERT

Only those who have felt the need of hospitalization—people who have been confronted, in their immediate families, with serious illness and have no recourse for medical treatment, found today only in a modern hospital—can fully understand and appreciate what a hospital with all of its facilities, means to the life and welfare of a community. Medical science, and health services, have probably made more forward progress in recent years, than in the whole annal of human history. Any large community today without the trained specialist in medicine—including all of the varied branches of this great profession—and without hospitalization for its sick has the sympathy of all right thinking people.

An Arresting and Graphic Story

Georgia Infirmary is a most remarkable and laudable demonstration of what white people will do for colored people—how far they will go—when they have determined what their obligations, responsibilities, and opportunities are, to aid the underprivileged in their midst. It is also a lofty plan and affection of one race group for the other. It conveys a true and beautiful picture of the most outstanding and forward looking white people of the South at work for their own next door brothers in black. It is a striking example of white men

Right thinking people will agree with the writer who says:

"No one could have conceived such a lofty plan and no one could have carried it through so zealously, without being gifted with that estimable trait—the abiding resolve that man shall not suffer."

How this small group of representative men from Chatham, Bryan, McIntosh, and Camden counties could become so possessed with Liberty, the ideal to which they were called and women, who have rightfully conceived their responsibility and have been unfailing in their adherence to the trust imposed upon them. No one can ever be unfamiliarized with the historian when he tory of this institution can ever be a pessimist about the future possibilities of the two race groups in the South.

Chartered December 24, 1832, Georgia Infirmary is the oldest institution of its kind in America, with the sole objective of serving underprivileged colored people.

6-25-44

of distinction and honor—in peace and in war—unfailing and unflinching in adherence to their pledge, and their resolve, to carry the message of physical health and strength—sound healthy bodies—to men and women in greatest need.

Robert Browning says:

"Nor does mind help body more than body helps mind." If this is true, as most thinking men will agree, then in helping to keep men physically fit and well, these far-seeing men have served not only the body but the whole man—body, mind and spirit.

R. M. Charlton in an address on the 100th anniversary of this remarkable institution, said among other things, "That such a conception originated here is understandable, but that men of such note for 100 years should so continually interest themselves in the relief and protection of aged and afflicted Africans suggests this outstanding idea that the most gracious gift of which the human mind and its adjunct, the human heart, are capable, must lie in both relief and protection. Both are elements of that redeeming quality of man, the desire to cure the ills of the world, whether they be great or small." 6-25-44

The Larger Vision

This small group of pioneering forward looking, far seeing men meeting upon call for their first time 113 years ago were imbued and thrilled with their job. They soon realized that "No man lives to himself" that no community can be stronger than its weakest member—that unkempt, poverty stricken, diseased human beings, although slaves, are nevertheless an impediment to community progress. They soon learned that the two race groups cannot live, and work harmoniously, next door to each other and not be vitally affected by and concerned about each other's welfare.

The lesson of these founding fathers, of hospitalization for negroes in America, and the inspiring, and all impressive example, of the Georgia Infirmary should become a part of the civic and social textbooks of every community in the South.

Georgia Infirmary's message is a message not only of the obligations of the strong to the weak but it is also a crying call of the underprivileged black man in every community, where poorly housed, underfed, underpaid negroes, living in unsanitary conditions, plead for a chance to live a full life—to do their full share in "Helping to build a better world."

There is only one Georgia Infirmary. As the years pass by there will doubtless be an expansion of its services to include provision for services of negroes in all the Savannah trade territory. This vision is evident in the selection of directors from the coastal counties. It is within the range of possibility that some day in the not too distant future we may find here a great center for the training of nurses, a graduate center of medicine and surgery, of all coastal and tropical disease—a practical and common sense laboratory and a "proving ground"—where white people and black people in the South can work out together in friendly rivalry and co-operation the health problems of all the people. 6-25-44

Georgia and the whole South greatly need today the full mobilization of all of its human resources—its men and women of character, high purpose, decision and compassion, regardless to creed or color—when we call the roll of the men who have made the service at Georgia Infirmary a credit to our community, state and nation, we fac; a list of Savannah's best "working together." What might we not look forward to if in every phase of the life of every community in the South all men and women would work in harmony for common objectives and high ideals!

Maximum abundant life for all the people can only become a reality when all right thinking human beings realize that every man should have his "place in the sun"—his opportunity to achieve! Georgia Infirmary is a great start in the right direction! All honor to the men and women who throughout the years shouldered this moral obligation, great responsibility, and challenging service!

Negro Health Hub Rites Toda

Constitution—Atlanta, Ga.

The Westside Health Center for Negroes, the first clinic of its kind in Georgia to be completely staffed by Negro physicians and nurses, will be formally dedicated at 5 p. m. today at ceremonies on the grounds at 186 Sunset avenue, N. W. 7-16-44

The center, now used primarily for diagnosing and treating venereal diseases, is expected ultimately to include all health services. Sponsored by the city health department, the center was financed by city, state and federal funds.

Speakers at today's dedicatory ceremonies will include Dr. James F. Hackney, assistant city health officer; Dr. E. S. Armstrong, city specialist on venereal diseases. Dr. Dan Bowdin, of the state health department; Earle Lippincott, of the Federal Security Administration, and Dr. W. A. Mason, Negro venereal disease specialist loaned to the city of Atlanta as full-time director of the clinic. 7-16-44

The band from the Butler Street Y. M. C. A. will play at the exercises and the public has been invited to inspect the new center.

The Situation At Grady

Daily World Atlanta, Georgia - August 2, 1944

Present prospects indicate that the sorely needed services of Negro nurses will be discontinued at the Grady Hospital by September 1 unless something is done to ameliorate conditions. Overcrowding of nurses at their living quarters is said to be the basic cause for the move.

It is difficult to see how the State Examining officials could have reached any other conclusion. We understand that the Superintendent at Grady, together with the Chairman of its Board, and the entire City Government favor continuation and improvement of the services. The only hitch now is the availability of $400,000 from the federal government, which it is claimed, is not forthcoming, due to the lack of funds for that purpose.

It is to be sincerely hoped that officials at Washington will see their way clear to make available immediately this small but badly needed fund. Grady hospital is the only government-accredited unit in the State where families of soldiers can go for free parental care. There is only one other school for training of Negro nurses in the state, located at Augusta, and maintained in connection with a cooperative agreement between Paine College and the Georgia University System.

With the dark prospects of continuing increase of venereal diseases among Negroes, with the increase in delinquency, and with the definite threat of multitudinous problems being created by the war, together with that of postwar adjustment, it is not only necessary that these services be improved greatly to care for these conditions, which most certainly will prevail. 8-2-44

In the final analysis, it is the responsibility of local officials, whether the federal government helps or not, to see that adequate provisions are made for these nurses.

Reveal Grady Had Fair Warning On Nurse Home

Daily World - Atlanta Ga. August 2, 1944

While officials of the Grady hospital Board of Trustees Tuesday sought an appointment with Grady Nurses' Home dispute, a letter the governor wrote Mayor Hartsfield aroused considerable interest.

The State Board of Nursing Examiners on July 26 notified Grady officials "that no further admissions to the Negro school will be approved until housing has been made adequate." Upon this order the Grady Board of Trustees sought "an explanation" of the order, and carried the matter to the governor.

The governor, in his letter, dated July 28, said had been advised by the secretary of the Board of Examiners that the following took place: 8-2-44

1. "That Grady Hospital authorities were notified that the nurses' residence of the school of nursing for Negro students was not acceptable on the following dates: March 25, 1940; February 19, 1943, March 24, 1944, and May 22, 1944. (The first, fourth and fifth notices were submitted in writing.)

2. "That on the same occasions the hospital authorities were notified that they should budget for nursing service. While the school can fulfill its educational purpose and also carry on a reasonable portion of the nursing service load, it cannot carry it all. This was not done when nurses were plentiful, but can still be done now. While there is a shortage of graduatae nurses, at present, the Army is taking a limited number of Negro nurses, and Negro graduates nurses can be secured. 8-2-44

3. "That while many improvements need to be made, the Board of Examiners is requiring the hospital only to provide healthful living conditions in the Negro nurses' residence."

However, in the letter Governor Arnall expressed his desire to "help all the adjustment of the problem."

Governor Declines Part In Grady Home Dispute

Daily World - Atlanta, Ga. 7-30-44

Governor Arnall declined on Friday, in a letter to Mayor Hartsfield, to intervene in a dispute between the state nurses' examining board and the trustees of Grady hospital over an order of the board instructing Grady not to accept new Negro student nurses for the term beginning September 1 unless "heathful housing facilities" have been provided.

The governor said Friday that the board of nursing examiners has full authority in the situation.

In the letter to the mayor the governor suggested that city officials, Grady hospital trustees, and members of the nursing examiners board hold a conference to smooth out the difficulties.

Governor Arnall said he had seen informed the board had no jurisdiction [illegible] ordered construction of a new building for a nurses' home, but merely demanded that conditions be improved and adequate accommodations for nurses and student nurses be provided.

Until a new home can be provided, the nurses' group suggested that modern and adequate quarters for student nurses be acquired nearby. Wilson said he had attempted to procure several units in the Henry Grady low-cost housing project near the hospital and had been unsuccessful. He said none others are available in that section of the city.

The Grady board, the mayor and other administration leaders have sought federal aid in building a new, modern and adequate Negro nurses' home at a cost of $400,000, but so far have failed in the effort.

HAS NO JURISDICTION

"I positively state that I have no jurisdiction or control in this matter," Arnall wrote. "This board is created by law and charged with certain duties, and I as Governor, cannot attempt to control or operate the nursing examiners board. When I appointed the members of this board, my duties and responsibilities passed to the board."

The Governor stated that he understood the board is most anxious to cooperate and assist Grady hospital and the city. He said he had seen informed the board had no jurisdiction [illegible] ordered construction of a new building for a nurses' home, but merely demanded that conditions be improved and adequate accommodations for nurses and student nurses be provided.

Until a new home can be provided, the nurses' group suggested that modern and adequate quarters for student nurses be acquired nearby. Wilson said he had attempted to procure several units in the Henry Grady low-cost housing project near the hospital and had been unsuccessful. He said none others are available in that section of the city.

The Grady board, the mayor and other administration leaders have sought federal aid in building a new, modern and adequate Negro nurses' home at a cost of $400,000, but so far have failed in the effort.

The Governor's position was disputed Friday in an oral opinion given by Assistant City Attorney Bon Almand. 7-30-44

"The state board of examiners of nurses is without legal authority to force Grady hospital to retain Negro student nurses for the term beginning September 1, unless 'heathful housing facilities' have been provided," Wilson said he had informed Frank Glenn, superintendent. Thomas K. Glenn, Grady board of administers the [illegible] erated by Emory [illegible] king a conference [illegible] or to protest the [illegible] s action.

The governor said Friday that with the examining [illegible] the board of nursing examiners has full authority in the situation.

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25-1944

Illinois

PROVIDENT HOSPITAL'S CAMPAIGN

Defender - Chicago, Ill.
9-9-44

The announcement a week ago that Provident hospital was successful in its financial drive was exceedingly gratifying. That the southside had met with cash its quota of $50,000 is a fact of considerable import and one which deserves more than a passing notice. Never before in the history of the southside has a financial campaign been so enthusiastically subscribed to by the people. Never before have they responded with such eagerness to the appeals of a community institution. This is an indication of a growing sense of responsibility that has been heretofore so woefully lacking, and a feeling of respectability so necessary an attribute to the cultural upbuilding of the race. It was no accident that brought 41 churches of the community into full support and cooperation of the drive. It was no accident that the pledges were actualiy honored and redeemed. 9-9-44 It was no accidental moral awakening that brought on a spontaneous rally to the cause. All these things which manifested themselves during the process of the drive were the results of careful planning and meticulous execution of a deliberately thought-out program. Heretofore Negroes have been content to give pledges leaving the actual monetary contributions as a responsibility of the other race. But in this campaign they came forth with cold cash and redeemed all the pledges without a whimper.

Since Provident hospital has never been able in the past to stage a financial rally with anything near the satisfactory results that this drive has yielded, it is logical to attribute the success of the campaign to Andrew J. Allison, superintendent of Provident. Mr. Allison is comparatively a newcomer to the community, but he is not a newcomer to the field of public relations to which he has devoted 30 years of his life. He is familiar with all the varied facets of social service. He was in the War Camp Community Service in the first World's War, advising and counseling and devising means for social rehabilitation. He has had experience in Red Cross and USO centers. He had been offered half a dozen jobs before he came to Provident. He accepted the position at this hospital because he felt he would be closer to human problems than he would be in the other fields in which he had been asked to render his services. 9-9-44

Following his graduation from Fisk, Allison pursued graduate studies at Harvard and Yale universities. He is a quiet, dignified and engaging person. But underneath the quietness and dignity there is a dynamic force that burns with incandescent glow when his ingenuity and intellectual powers are challenged. Certainly no man in the country that we know of has had as varied experience and accompanying success as the present superintendent of Provident hospital has.

He has worked with the National Urban League in New York City. He has had experience in industry and housing. He has been educational adviser and has dealt with one or more additional spheres of human endeavor.

Provident hospital was indeed fortunate in securing his services. The community is proud to have Mr. Allison in its midst. The Chicago Defender extends its congratulations to the Board of Directors of Provident hospital as well as to Mr. Allison.

25-1944

Kentucky

Negro Ward a Fire Trap.

Courier-Journal—Louisville, Ky.

To the Editor of The Courier-Journal:

In a round-table discussion over WHAS conducted by the University of Kentucky last week, Dr. Isham Kimbell, superintendent at Central State Hospital, Lakeland, stressed the need for a mental clinic at the institution. Dr. Kimbell said that "the chronic condition of over-crowding at Lakeland interfered with the proper classification and treatment of patients." 7-13-44

In this and other statements made in the discussion, Dr. Kimbell continued to carry on in the interest of the mentally afflicted at the state hospital, in a manner which has attracted the attention of the citizens of the Louisville area who have become interested in the situation at the institution.

A most capable and conscientious superintendent, as referred to editorially by The Courier-Journal several weeks ago, Dr. Kimbell's incessant efforts to obtain moral and financial aid for the needed improvements and necessary facilities at Lakeland has been in the interest of all the patients without regard to race.

But the over-crowded Negro ward, which has been termed a "fire-trap" and been the target of grand jury investigations from year to year, has been an eye-sore to Dr. Kimbell, who has had the co-operation of committees of Negro citizens in the effort to change the condition.

During the late days of Governor Keen Johnson, a building program at Lakeland, included a new ward for Negro patients, and it was understood that a requisition for modern facilities for the ward was also approved.

Although the work at Lakeland was held up as a result of the change in administrations, it is hoped that Gov. Simeon S. Willis and the State Welfare Commissioner will see that the improvements at the Central State Hospital as specified and promised by the former administration are completed. 7-13-44

Negroes in this section are grateful to Dr. Kimbell, and it is hoped that his program will in no way be hindered or hampered, and that he will be permitted as superintendent at Lakeland, to do the work he has so well begun, and in which he is so deeply interested. I. WILLIS COLE.

Louisville.

Negro Hospital Gets $3,700 —With Some Ifs Attached

Courier-Journal-Louisville, Ky.

6-16-44

A string was tied to $3,700 allocated by the City-County Health Department to the Red Cross Hospital, 1436 S. Shelby, by the board of trustees yesterday at its monthly meeting.

The board voted to pay the money, used principally to raise the Negro hospital's standards to American College of Surgeons' requirements, "on condition the health director is satisfied the money is being properly employed."

Differences between Red Cross Hospital trustees and prominent Negro physicians has resulted in "an unsatisfactory situation," Dr. Leavell told the board.

Price Raises Feared.

The board approved a budget $193,131 larger than for the last fiscal year, but $73,909 smaller than requested, and ordered Dr. Leavell and board momber Louis Tachau to write the Fiscal Court and finance committee of the Board of Aldermen that because of the reduction, service at both General Hospital and Waverley Hill Sanatorium would inevitably be curtailed if prices increase.

6-16-44

The board approved a regulation requiring all county swimming pools to have a qualified life guard on duty during the entire time pools are open.

Recommendations of a committee that has established a code of regulations for nursing homes will be submitted to the board members for action at the next meeting.

Grand Jurors Condemn Connors Jail Regime: Decry Use of Negro Guards Over Whites

Bad Conditions At Lakeland Also Criticised

Repeating almost monthly condemnations of "antiquated and dismal" facilities at Central State Hospital, the December grand jury yesterday lashed out in a new direction also with sharp criticism of Jailer Martin J. Connors and conditions in the Jefferson County Jail.

Connors was characterized as "unduly excitable, highly irascible and pugilistically demonstrative."

Unsanitary Plumbing Noted.

The report to Criminal Court Judge Loraine Mix said the jail was inspected on December 14 and that "little evidence of any attempts at cleanliness was observed. The floors were dirty and in many instances littered with refuse."

Showers and toilets are untidy and unsanitary, indicating lack of proper care and attention, the grand jury reported.

The dormitory for women prisoners was neat and clean, the cots arranged in orderly fashion, the floors were in "good shape and the other surroundings possibly as good as could be expected," the report stated.

It continued: "Although we deeply deprecate the conditions we have mentioned, our most severe criticism must be centered on the jail personnel, or the inadequate personnel. The jailer, Mr. Connors, whether efficient or not, we do not presume to judge. That another man under the same conditions could produce better results, we, of course, are unable to say.

Use of Negro Guards Hit.

"We do know from our own experience while being conducted on our tour of inspection, that Mr. Connors is unduly excitable, highly irascible and pugilistically demonstrative."

The grand jury "seriously condemns" use of Negro guards over white prisoners in the jail. "It should not be permitted under any circumstances and its continuance will undoubtedly result in a great deal of trouble," the report declared.

After the report was read in Criminal Court, Foreman Ray V. Mulkern, 2530 Taylorsville Road, explained that by "pugilistically demonstrative," the grand jury meant he excitedly waved his fists in the air to emphasize points as he discussed conditions with the jurors as he escorted them through the jail.

Connors Upset By Visit.

Their surprise visit was made while Connors was out, which seemed to upset him, Mulkern said.

The jury foreman quoted Connors as saying when he reached the scene: "I'm not afraid of this grand jury or any other grand jury—I've been investigated by them before. A grand jury is nothing in my young life."

Connors "bellowed and hollered in a loud voice" and asked prisoners to verify his answers to the jurors' questions and to statements he offered, Mulkern said.

Funds Called Inadequate.

Asked if he thought it possible the prisoners might not unanimously have answered questions the way Connors wanted answered, because they are afraid of him, Mulkern replied, "No, I don't think so."

After reporting that the day they visited breakfast at the jail consisted of rolls and coffee, lunch was bean soup and bread and dinner bologna and beans, the jury reported: "We understand that $1 per capita per day is allowed the jailer (to care for prisoners and feed them) but that 25 cents is deducted from each dollar, leaving a net of 75 cents per capita per day. This amount cannot possibly provide the necessary money to pay salaries, maintenance of the institution, purchase of supplies and the care of prisoners.

Want Financing Corrected.

"Either increase the amount or abolish the fee system, and run the jail on a sufficient appropriation to properly maintai nit," the report recommended.

"Antiquated and dismal" women's quarters at Central State Hospital were deplored by the jury, which found walls and ceilings had many holes in them, that the floors sagged in places, that windows and woodwork are warped and bulging and "the place is almost a hovel."

There is need for great improvement in both the violent ward of the women's section and the sick ward, the report stated.

Low Wage Scale Noted.

There are serious shortages of skilled and competent people, which the grand jurors found not surprising in view of the $84 a month average wage paid.

The jurors wrote, "May the Lord have mercy on the people of the State of Kentucky if they do not take the necessary steps to correct conditions which exist at the Central State Hospital, and which undoubtedly exist in other similar institutions within its borders."

The report commended the excellent work being done, often in the face of physical handicaps, at the County Workhouse, Home for the Aged and Infirm and other County institutions.

25-1944

Louisiana

Hospital Gets Big Share of Racing Funds

Tribune - Savannah, Ga.

10-19-44

NEW ORLEANS, LA.— The Flint Goodridge hospital of Dillard university received the largest donation of any local charitable institution from the trustees of the Victory Meet of the Fair Grounds Breeders and Racing Assn. of Louisiana.

This organization divided among eight local institutions and one national the sum of $98,781.74 which was the net income from the operations of the race track in New Orleans for the first 15 days of the 1943-44 season.

The total distribution of the fund, according to E. R. DuMont, chairman of the association, was as follows: Flint Goodridge hospital of Dillard university, $12,000; United Service Organizations, $8,600; American Prevention of Cruelty to Ani- $5,000; Waldo Burton Memorial Home, $2,000; Society for the Prevention of Chuelty to Animals, $10,181.74; Louisiana Society for Crippled Children, $2,000; Women's Dispensary, $10,000; Kingsley House, $10,000

10-19-44

These organizations are located in New Orleans. The American Red Cross, a national organization, received $40,000.

Story Of Jim Crow Signs Seep From Lagarde Hospital

Informer — Houston, Texas

7-15-44

By JOHN BLAIR

NEW ORLEANS, La.—

The establishment of a racial segregation policy at Lagarde Hospital here is the current topic of conversation among persons believed to be well-informed, Informer-Sentinel representatives have noted for the past two weeks.

According to reliable information, certain sections of the government owned institution are marked with signs and partitioned off for members of the white and Negro race.

The latest section to be thus treated, informants declare, is the engineer's department where a partition has been built to separate the toilet facilities. A separate door has been cut in the building, a wall erected, and one section is now designated for the use of white civilians and soldiers and the other section for Negroes, informants declare.

7-15-44

It is expected that local organizations may possibly seek to verify the reports by contacting Colonel Upshur who is in charge of the hospital. It is being pointed out that racial segregation is undemocratic and especially in a government-owned institution where Americans of all races and creeds are suffering from wounds and injuries sustained while supporting the fight to preserve democracy.

25-1944

Missouri

$40,000 RAISED BY A. M. E.'S FOR DOUGLASS HOSPITAL

Argus - Saint Louis, Mo.

1-14-44

Government Will Add $120,000

The A. M. E. ministers of St. Louis and vicinity, Dr. Russell S. Brown, President, gathered at the home of Bishop Noah W. Williams, 4423 Enright avenue Wednesday, and congratulated him on raising $40,000 for Douglass Hospital in Kansas City, which makes possible a gift of $120,000 from the U. S. Government for post-war program.

Marks United Effort

Every A. M. E. Church from St. Louis to Los Angeles responded with a volunteer gift for this great work. The ministers gathered at the home of the well-known prelate and feted him with a stag party. Ice cream and cake with songs brought cheer while Dr. Helen A. Williams, his wife, turned the home over to them. Bishop Williams, recovering from the flu, responded in a most touching fashion. He told how he had a dream while he travelled in Bible Lands for a School of Religion that would train young men to be ministers and church workers to be efficient in their service. Also how he wanted to develop Douglass Hospital and make it a great service center for the training of nurses and helping to heal the bodies of people. He believes in an healing ministry.

Wives Are Active 1-14-44

Last year over $30,000 was raised by Dr. Helen A. Williams and the wives of the ministers, to free it of a mortgage, and the Government sent a commission to study it, with the result of this large co-operative gift. At the meeting of the A. M. E. ministers this week new officers were elected and this was their first act. For President they chose Dr. Russell S. Brown, the distinguished pastor of St. Paul A. M. E. Church; Vice-President, Dr. W. D. Wilkins, Wayman; Secretary, Rev. J. H. Matlock, Kirkwood; Assistant Secretary, Rev. R. F. Thompson, Rock Chapel; Treasurer, Rev. E. W. Smith, Webster Groves. Dr. Fred A. Hughes of St. James, and Rev. H. C. Cummings of St. John, with these officers, made up the committee on arrangements.

25-1944 New York

First Lady Clears Up Stand On Social Equality

Defender — Chicago, Ill.

9-16-44

FIRST LADY VISITS INTERRACIAL HOSPITAL

Defender — Chicago, Ill. 9-16-44

By RAMONA LOWE
(Defender New York Bureau)

NEW YORK.—Mrs. Eleanor Roosevelt, whose fair-minded stand of the racial issue has made her persona non grata in the Deep South, this week became the focal point of bitter verbal cross-fire over her expressed views on social equality.

In a visit here to the interracial Sydenham Hospital, first of its kind in the nation, the First Lady openly accused Dixie reporters of misinterpreting her views by not including all of her letter to an Evergreen, Ala., woman on the controversial Negro issue.

Explaining that her statement that she "never advocated social equality" referred to legislation, Mrs. Roosevelt stated:

"You can legislate only on matters involving the rights of citizenship. The elimination of discrimination against the citizenship rights of a group will eventually be followed by the elimination of social inequality.

"Personal Matter"

"Social equality is a personal matter. Social equality is what you have among friends. You can't legislate that. No one can tell me who I can, or cannot, have to dinner."

9-16-44

Mrs. Roosevelt had high praise for the work being done at Harlem's 218-bed, interracial hospital. She said it was "encouraging because it demonstrates that much that people fear, when once it is done, is not only possible but easily accomplished."

She added that it was unfortunate that a special hospital had to be set apart for an interracial experiment instead of Negroes and whites being able to be hospitalized freely in all hospitals.

In her third trip to Harlem this year, the First Lady visited the wards, where she stopped to chat with white and colored children, the laboratories, clinics and the employee's lunchroom. While Mrs. Roosevelt was in the lunchroom, the diners stood and applauded in her honor.

Seen Wedge in Color Line

Sydenham is the first hospital in the country to abolish the color line completely and is being eyed with considerable interest locally as it might prove the wedge to break down the color barrier in all other hospitals in the city.

9-16-44

Mrs. Eleanor Roosevelt chats with patients in the Children's ward at Sydenham hospital in New York. Mrs. Roosevelt visited the hospital to see at first hand the working out of the interracial plan under which the hospital has now been operating for eight months. Sydenham is the only hospital in the country in which no considerations of race, creed or color weigh in the selection of either staff or patients.

In her letter to Mrs. Catherine Stallworth of Evergreen, Ala., who told Mrs. Roosevelt that her ideas about Negroes arose "from a lack of complete knowledge of the Negro situation in the South, particularly in the small towns where there are almost as many Negroes as whites," the First Lady was quoted as writing: 9-16-44

"Much that is said about my attitude on the Negro question is distorted and exaggerated by people who are opposed to my husband and me, and by those who have deep-rooted prejudices. . . . I have never advocated social equality," Mrs. Roosevelt wrote.

"In a democracy, however," she explained, "we cannot have 12,000,000 people who are denied rights as citizens."

Those rights, as Mrs. Roosevelt summarized them, were: "An equal opportunity for employment according to ability and at equal pay; an equal opportunity for education; for justice before the law, and to participate in government through the ballot."

World Question

Further elaborating on her racial opinions, Mrs. Roosevelt said:

"This (race) question is not just a southern question. It is a world question. . . . If we are not fair and just to the colored people, how can we expect other countries to trust us and believe in our good faith.

9-16-44

"I know that in many places Negroes outnumber the white people and that is one explanation for not giving them the right to vote. There can be and should be a standard of literacy and education required (for voting), and I think you will find that the Negroes will not vote as a group any more than any other minority group does in this country.

"Perhaps one of the solutions will be to move the Negroes into places where there are only a few and thus prevent the lack of balance."

Stand on Migration

In New York, Mrs. Roosevelt also expressed the opinion that she considered it a mistake in the past to permit large numbers of one nationality or race to settle in "little isolated islands."

The war is doing much, she added, to balance American communities with respect to types of population, but that she would not advocate moving groups against their will in order to achieve the balances which in time would meet many of today's population problems.

9-16-44

Whether Negroes moved from one community to another was a matter of individual choice and could not be forced on them, Mrs. Roosevelt said, adding that the longer people settled "in little islands of their own" the longer it took to integrate them into Americans.

"I think we have made perhaps one mistake in the past with immigration into this country," she said. "We have let people settle into isolated groups that were all Swedish, or all Norwegian, so that they became little islands. What eventually happened was that it took longer to integrate into Americans."

Lauds Hospital Board

The fear expressed by Southerners that in communities where Negroes outnumber the whites it would mean that the whites would have "no say" if political rights were accorded the Negroes was "utter nonsense," she declared.

"There are no more similarities in that group than in any other," she said. "They don't all feel the same."

9-16-44

She asserted it was ridiculous to suppose that all Negroes would vote the same way. "No one race votes one way," Mrs. Roosevelt said, "and there is no more similiarity than there is in any other group."

Mrs. Roosevelt praised the Sydenham hospital's board of trustees which now numbers six Negroes and 18 whites. "That is my idea of democracy in action," she said.

As Mrs. Roosevelt entered a men's ward, Robert Hicks, 32-year-old taxi driver, was just about to be shaved by an attendant. The other patients chuckled and Mr. Hicks, under the lather, laughed and looked a bit sheepish. Mrs. Roosevelt apologized for the interruption.

New Hospital Policy For Mount Vernon

People's Voice—New York, N.Y. 3-25-44

MT. VERNON, N. Y.—Mt. Vernon hospital authorities agreed to take immediate steps to eradicate any elements of racial discrimination that might have had any place in its policies and practice in the past, and told delegates from the Negro Civic League and the local YMCA last Friday that they and any Negro member of Mt. Vernon would be heartily welcomed into the association.

Mt. Vernon's only hospital has been under fire for the last few weeks from the city's one tenth Negro population and has received several delegations protesting acts and policies of racial discrimination, especially in view of the $40,000 it received from taxpayers. 3-25-44

DISCLAIMS SUBSIDY

The hospital disclaimed any public subsidy, explaining that the money it receives from the city is for ward service to public patients. Dr. A. L. Zerbey, president of the board of managers, made it emphatic that he was not acting under any political pressure but that he was responding simply to the arguments and information brought by the delegates. Friday's delegation consisted of Dr. James E. White, president of the Negro Civic League; Dr. W. S. Randolph, a civic lieader and member of the Housing Authority. Emmett Lampkin, executive secretary of the local YMCA, and Llewellyn Ransom of the Peoples Voice.

Dr. A. C. Emmel, head of the hospital's medical board said, "No man on the board would keep a doctor out on the basis of race." The only requirements for admission to the staff are that the applicant be a member of the county medical association, a graduate of a recognized medical school, of good medical character and practicing in a regular, up-to-date way.

President Zerbey denied that there was any Negro quota of beds in the hospital today, and said there would be no racial discrimination in the bed service in the ward, semi-private or private rooms. 3-25-44

HINDERS WAR EFFORT

When it was pointed out to him that to deny the hospital for the training of nurses aids would be contrary to the war effort Zerby said he would take the matter up immediately with the Red Cross and Negro representatives. The question of the absence of Negro graduate nurses serving in the hospital was discussed, and this too was conceded as a practice neglected in the past and one to be corrected. When it was pointed out that a fair Negro nurse had been dismissed when her race identity was discovered, superintendent A. B. Solon did not deny this, but President Zerbey expressed surprise, and showed ignorance of most of the complaints brought forth. His first request was for specific cases. 3-25-44

When Zerbey pleaded that the hospital be not used as a testing ground for racial adjustment, he was told that any steps the hospital made toward a more democratic adjustment would only serve to bring it in line with what is happening all over the country, and that it would serve to give Negro soldiers an incentive for giving up their lines on the battle fronts.

Harlem Shuffle

Time Magazine—Chicago, Ill.

The first U.S. voluntary hospital to take both white and Negro physicians has succeeded "beyond expectation." This announcement about Harlem's Sydenham Hospital was made last week by Trustee Harry C. Oppenheimer. 11-20-44

When Sydenham began in a Harlem brownstone house in 1892, most of its ward patients were (as they still are) Negroes. But, like the rest of New York City's voluntary hospitals, Sydenham took no Negro doctors. Twenty years ago, the hospital moved to a fine new 200-bed building. White patients filled the private and semi-private rooms. The utility staff was mixed, and there were a few Negro nurses. The staff doctors were all white.

The only hospitals in New York City where Negro doctors could practice were the free public hospitals, where all patients were ward patients. There was, in short, no hospital where a Negro doctor could send a private patient and continue to treat him. For sick Negroes, going to the hospital meant going to a ward, accepting any doctor the hospital provided. Moreover, the banning of Negro doctors from the great voluntary teaching hospitals seriously cut a Negro's chances of getting good training. At least part of Harlem's high mortality rate (36% above the rest of the city in 1943) could be blamed on the shortage of good Negro doctors. 11-20-44

* The preliminaries: 1) a bottle of Vichy before retiring; 2) a teaspoonful of sodium bicarbonate upon rising; 3) a cold bath; 4) breakfast, "no matter how revolting it may appear."
† Philanthropic, nonprofit-making, supported by contributions and fees from private patients.

To Do What They Could. Last December, Sydenham's trustees finally decided to do what they could, voted to accept Negroes on the medical staff, added several Negro trustees. When the staff was told of the move, two nurses and three other workers quit. But the white doctors held fast. Last February, Negro doctors began work, Negro patients began to filter into private rooms (10-20%) and semi-private (25%). The hospital's management, worried about mixing races in semi-private rooms, still asks each patient whether he objects; so far none has balked. 11-20-44

At present, 23 of Sydenham's staff of some 300 doctors are Negroes. Famed Negro Surgeon Peter Marshall Murray, an attending physician on the Obstetrical and Gynecological Service, has numerous white patients. Of the twelve interns, two are Negroes. About 60% of the nurses are Negroes, and there are a few Negro nurse's aides. The hospital's Negro backers hope the proportion of Negroes does not get too high—Sydenham might become known as a Negro hospital, and the whole experiment of interracial hospitalization would be defeated.

Disapproval of Sydenham Plan Voiced by NAACP

AFRO-American Balt. md.

NEW YORK—NAACP disapproval of the Sydenham Hospital experiment after careful study of the long-range principles involved in the pattern being established was revealed in a resolution by the board of directors recently. 11-18-44

The resolution said:

"The establishment of such a hospital in a community which is largely a segregated one makes Sydenham Hospital inevitably segregated. It is understood already that approximately 95 per cent of the out-patient and in-patient load is colored. 11-18-44

"Despite resolutions passed by county medical societies and other bodies, the unpublicized effect of Sydenham Hospital will be a quiet refusal to qualified colored doctors and nurses of admission to the staffs of other hospitals. 11-18-44

Limitation Imminent

"When the competition again becomes keen after the war, the conscious or subconscious tendencies of admission committees will be to suggest to colored applicants for staff appointments that they apply to Sydenham Hospital."

The NAACP further criticized the plan, stating that in Los Angeles, Cleveland and other cities the plan is being seized upon to frustrate or to postpone the admission of qualified colored doctors and nurses to tax-supported and tax-exempt institutions. 11-18-44

The association announced that it will continue its campaign for admission of qualified men and women of the medical profession to all hospitals and institutions which are supported by tax funds, directly or indirectly, and which receive benefits therefrom.

sage of a resolution by the Directors as follows:

Tribune—Philadelphia

"The establishment of such a hospital in a community which is largely a segregated one, due to various pressures and such legal devices as restricted covenants and the machinations of real estate interests to confine Negroes to a ghetto, makes Sydenham Hospital inevitably segregated in its clientele. It is understood already, approximately 95 per cent of the out-patient and in-patient load is Negro.

"The NAACP is further convinced that despite resolutions passed by County medical societies and other bodies the unpublicized effect of Sydenham Hospital will be a quiet refusal to qualified Negro doctors and nurses of admission to the staffs of other hospitals, public and private. When the competition for hospital posts again becomes keen after the war, the conscious or subconscious tendencies of admission committees will be to suggest to Negro applicants for staff appointments that they apply to Sydenham Hospital. 11-18-44

"Finally, the NAACP recommends disapproval of the Sydenham Hospital plan because there are indications that in Los Angeles, Cleveland and other cities that the so-called Sydenham Hospital plan has been seized upon to frustrate or to postpone the meeting of legitimate demands of qualified Negro doctors and nurses for admission to tax-supported and tax-exempted institutions.

"The NAACP will continue its campaign for admission of qualified men and women of the medical profession to all hospitals, federal, state, county and municipal, which are supported by tax funds, directly or indirectly, and all institutions which receive benefits such as tax exemption and city pay for patients, irrespective of race, creed, color or national origin, the sole determinant to be ability and character.

NAACP Deplores Pattern Of Sydenham Hospital

Tribune—Philadelphia, Pa. 11-18-44

NEW YORK—NAACP disapproval of the Sydenham Hospital experiment after careful study of the long range principles involved in the pattern being established, was revealed in recent Board action in the pas-

25-1944 New York

Sydenham Hospital Plan Believed Link in Chain to Spread Jim Crow Post-Graduate Medical Training

Tribune - Washington, D.C.
1-29-44

NEW YORK—Continued opposition to the newly reorganized Sydenham "inter-racial" Hospital here was expressed this week by ten prominent Harlem physicians charging that the new plan is "part of a deep-seated and long planned effort to completely segregate Negroes in American life."

The statement further charged that plans are already under-way for the new Sydenham Hospital to establish post-graduate facilities for Negro interns and doctors.

Segregated Facilities

The segregated plan, according to the statement, "is forced upon us through the efforts of the Sydenham 'strategists' and with its plans already underway to set up post-graduate facilities, it will soon be possible to complete a separate system of post-graduate work and internship for Negroes.

The special set-up for Negroes at Sydenham, continues the statement is a phenomenon not isolated nor entirely new in this country and really seemed to those who have fought segregation to be part of a deep-seated and long-planned effort to completely segregate Negroes in American life, and not stopping at medicine, although medicine and hospitalization were a logical point of attack.

All Negro students now applying for special medical training for Army service are referred either to Howard University in Washington, D. C., or Meharry in Nashville, Tenn., the statement says. This is an example of the limitation of educational opportunity resulting from segregation.

"Is this development at Sydenham Hospital the completed link in the chain of institutions for Negroes, already established or enlarged by foundations, including Washington, D. C., in the central part, Chicago in the west, New Orleans in the southwest, Nashville in the central south, or, do we wait for Boston in the northeast to complete the chain?" asks the statement.

It was declared that the doctors would continue their fight for integration in all hospitals receiving public funds. It also declares that "outrageous methods" were employed in putting over the project "against the highest and best interests of Negroes as American citizens."

Signers of the statement are: Drs. Ernest R. Alexander, Louis T. Wright, W. Adrian Freeman, James L. Wilson, Ralph Young, Harold L. Ellis, Arthur C. Logan, Walter Merrick, Richard M. Carey, and Roland E. Gunning.

1-29-44

NYC Hospital Opens Its Doors to Negroes

Peoples Voice - New York, N.Y.
7-15-44

A real home-front victory was scored this week with the announcement that Montefiore School of Practical Nursing had opened a training course to both Negroes and whites provided they meet certain minimum requirements. Pointing out that in the post-war world there would be a continuing demand for the type of service practical nurses are prepared to give, announcement of the course beginning this September reveals that the school is approved by the NY State Education Department and that its graduates are eligible to take the State Board exam leading to a license.

Applicants for this course, which leads to a well-paying, responsible, highly regarded profession, must be between 18 and 50 years of age, have an elementary school education, hold American citizenship, and be in good health and of high moral character. The training course is for no more than a 9-month period which includes classroom instruction and practical ward service and a 3-month period during which women pupils are assigned to the Bronx Hospital for care of mothers and children.

Tuition, books, maintenance and six attractive uniforms are furnished free of charge, and a monthly allowance of $35 is granted to every student after the third month. Fifty openings are available for the September class. Although the course is given at Montefiore, graduates would be placed in general service throughout the city.

7-15-44

Further information may be obtained from Miss A. C. Donahue, Superintendent of Nursing at Montefiore Hospital, Gunhill road, the Bronx.

People's Voice — New York, N.Y.
8-5-44

PUBLIC SPIRITED CITIZENS, both white and Negro, turned out last Wednesday at the Hotel Roosevelt to support the drive to raise $350,000 to help defray the expenses of the Sydenham Hospital project. The first inter-racial voluntary hospital in the city, Sydenham has a Grade A rating, is fully accredited by the American College of Surgeons, the American Medical Association and the NY State Department of Welfare. Foto shows at the meeting (l to r) Newbold Morris, president of the City Council and honorary chairman of the hospital; Mrs. William S. Paley, wife of the head of Columbia Broadcasting and chairian of the fund; Rev. James A. Robinson, pastor, Church of the Master; and Harry C. Oppenheimer, chairman of the hospital fund. 8-5-44

See Harlem's Interracial Hospital As Successful

Defender - Chicago, Ill.
7-8-44

By RAMONA LOWE
(Defender New York Bureau)

NEW YORK — When Sydenham Hospital was converted into an interracial hospital last December, controversy raged in Harlem.

There were those who said it would become a jim crow institution. Others thought that if any money was to be given in Harlem for hospital facilities, it should be given to the Edgecombe Sanitarium. The Sanitarium was described as a "boarding house with a sign out in front." It had no elevator nor oxygen tent, but it was all Harlem could boast of in the way of a private hospital.

A community hospital was sorely needed.

It was needed so that a patient could have the care of his private doctor and yet have the advantage of hospital facilities. It was needed so that Harlem's 175 doctors could have a workshop outside of Harlem Hospital, which is a municipal hospital rendering only basic care and offering none of the refinements that private hospitals afford.

Most of the babies delivered in the community were delivered by white doctors because of the lack of obstetrical facilities for the Negro physicians.

7-8-44

The health committee of the City Wide Citizens Committee on Harlem published a report showing the necessity for a voluntary hospital and aroused the interest of the United Hospital Fund. Although nothing was done immediately the need was so keenly felt by other doctors in the city that a theoretical hospital was projected on certain principles.

There must be no segregation. There must be interracial cooperation and there must be specific regulations so that the pitfalls into which the hospitals in St. Louis and Chicago had fallen would be avoided. It must not, for instance, be used as a place where Negro medical students would be segregated in their interneship. Physicians, nurses and technical workers must be integrated throughout.

7-8-44

Knickerbocker, Lutheran and Sydenham were all approached as possible plants to interracial project.

Sydnham had a current debt of $60,000 in bills and mortgage. Located in what was fast becoming a Negro slum area, its white patients had fallen off. It was willing therefore to organize an interracial staff and trustee board if its debt could be paid off.

7-8-44

It was a sound business offer and the two million dollar plant was taken over for $100,000. Twelve trustees were elected, six of them Negro. To the medical staff, 23 Negro doctors were added.

The only voluntary interracial hospital in the country it now has of the hospital. And it inspired the New York County Medical Society to pass a resolution in April calling on voluntary hospitals to open their doors to Negroes.

The experiment is considered a success by Benjamin Roth, president

Medical Democracy at Work

Afro American — Baltimore, Md.
9-5-44

8-5-44

An interracial experiment in Harlem has become an established policy. It is taking place at the Sydenham Hospital, where colored doctors, nurses and patients have equal footing with whites. Free wards and private wards alike hold white and colored patients. Hospital officials say that there has been no loss of white patients. Here Dr. Howard Kenney treats a white boy, 9-year-old Gilbert Jackson, in the children's ward.

Hospital Tells How Well 'All-Race' Policy Works

Discriminatian Ban Successful Beyond Sydenham's Expectations

The nondiscriminatory hospital service, installed Dec. 24, 1943, in New York's Sydenham Hospital, has been successful "far beyond expectation," Harry C. Oppenheimer, one of its trustees, today told the National Committee for Mental Hygiene.

Oppenheimer, speaking in a race-relations discussion at the committee's annual convention in the Hotel Pennsylvania, said the hospital's trustees had been greatly encouraged by the harmony among [illegible] Negro, Chinese and Japanese members of the institution's staff.

He explained that the hospital staff was composed mainly of Negroes and whites, but that it had one Chinese research worker and a Japanese receptionist.

"We were encouraged way beyond expectation," he said, "when we saw how this mutual social association worked out."

He quoted Mrs. Franklin D. Roosevelt as having remarked during a recent visit to Sydenham: "Social equality to me is what you have among friends."

Personal Friendship

"It is this personal friendship," he continued, "which is made possible at Sydenham by bringing people of various races together in an environment where they can really come to know one another."

He said the hospital had found that patients assigned to semi-private rooms have raised no objection to being placed with those of races different from their own.

Despite the success of the Sydenham experiment, the first such effort in the U. S. A., Oppenheimer said it was looked on with some disapproval by the National Assn. for the Advancement of Colored People, which believes it would have been better to work toward the admission of Negro doctors to the staffs of all New York hospitals.

11-9-44

Disagree at Present

"Our organization has met with the NAACP," he said, "and . . . we have decided to disagree for the present. So far, we have seen no evidence of their fear of Jim Crowism."

Dr. George S. Stevenson, medical director of the committee, said in his annual report that more than 10,000 volunteer social workers were now collecting data for medical histories which are included in the records of selectees for the armed forces.

He pleaded that the committee's members do their utmost to help correct public misconceptions regarding the meaning of rejection or discharge from the armed service for psychoneuroses.

Robert L. Cooper, executive director of the Wiltwyck School for Boys at Esopus, N. Y., told the committee:

"The minority problem is one of the most significant and far-reaching group-relationship problems facing the American people."

Cooper said the problem was placed in its boldest relief in relation to Negroes and Jews in all geographic areas, and to Mexicans on the West Coast.

"The Negro as a minority, a poor and suppressed minority, stands at the peak of the minority spiral," he said.

"Anxiety, fear and disappointment, confusion, conflict and not infrequently terror are inevitable by-products of the Negro's minority status as he strives to be a Negro and at the same time a participating American. Thirteen million of our citizens—or one out of every 10 Americans—have been relegated to the position of second-class citizenship. . . ."

11-9-44

First Lady Witnesses Democracy In Action

Age — New York N.Y.
9-16-44

Mrs. Eleanor Roosevelt Wednesday visited Sydenham Hospital to observe for herself the working out of the inter-racial plan under which the hospital has now been operating for eight months. The Sydenham Hospital is the only voluntary hospital in the country in which no considerations of race, creed or color weigh in the selection of staff or patients. 9-16-44

Photo shows (left to right): Edwin C. Boaz, trustee; Dr. Peter Murray, resident surgeon; David M. Dowin, superintendent of the hospital; Alan C. Dingle, trustee; and seated, Augustine A. Austin, trustee.

25--1944

NEW YORK

Races Mix from Trustee Board to Ward Patients

Afro American — Baltimore, Md.

8-19-44

Colored Doctors and Nurses Treat All Races, and Nobody Is Called by His First Name

By LULA JONES GARRETT
AFRO Womens Editor

NEW YORK — Chalk up another score for New York City in the great game of making democracy work.

This time it is Sydenham Hospital, 123rd Street and Manhattan Avenue, which has found that a complete non-discriminatory policy is not only feasible, but completely workable. Here is a hospital where colored and whites serve together on the board of directors and on the medical and nursing staffs, and where the color of skin doesn't determine the room in which the patient is placed.

Segregation Inspired

The story of integration at Sydenham Hospital goes back two years ago, when a group Harlem citizens got together find a remedy to a situation which colored pay patients were unable to obtain private service in N.Y. hospitals.

Dr. James H. Robinson, pastor of the Church of Our Master, told me, this week, of the efforts along this line, the struggle it took and the resulting opening of Sydenham.

8-19-44

The Rev. Mr. Robinson said that not only was this committee concerned about patient service, but about the lack of opportunities for colored physicians to practice and develop their skill and the vicious practice of the Specialty Board and the College of Physicians and Surgeons in no admitting colored to membership on the grounds that they had not sufficient practice and skill.

The first suggestion was to build such a hospital, but the amount of money required and the difficulty of building made this impracticable.

The committee then contacted hospitals throughout the section with a view to having them discard their discriminatory policies. Some were willing to adopt a halfway policy but none the completely unbiased set-up from trustee board to staff and patient care the committee demanded.

It took eight months of negotiations with Sydenham to effect the plan, Dr. Robinson said.

Sydenham has a fine eleven-story modern building. There is a 127-bed capacity. Of the 140 attending physicians, 24 are colored. Among these are Dr. Peter Murray, famed gynecologist and fellow of the American Board, Dr. George Cannon, chest specialist; Dr. Sara Allen, Dr. George Thorne, and Dr. May Chinn.

Nursing Staff Half and Half

Dr. Chinn and Dr. Murray had "privileges" at the hospital prior to its new program. At present there are 60 nurses on the staff, one-half of whom are colored.

At present there are two colored interns on the staff and plans are on foot to open a school of nursing within a few months, David M. Dorrin, hospital director, says.

Colored and white nurses work together on the floors, eat together in the hospital cafeteria, and toshare all facilities. A recent paof tient, a NYC judge, had, for instance, three special nurses, two of whom were colored and the third, white.

8-19-44

Half Trustees White

Six of the twelve members of the board of trustees are colored. They are the Rev. Mr. Robinson, Augustine Austin, realtor; Ferdinand K. Smith, treasurer of the International Maritime Union; Mrs. Harriet Shadd, manager of the Associated Charities Building; George Harris, a former city alderman and Alan L. Dingle, attorney, who is vice-chairman of the trustee board.

Assuring the success of the plan is the attitude of hospital officials.

Said Mr. Dorrin: "I have two specific aims. One is to send white patients away thoroughly sold on the idea of interracial cooperation. Two is to send colored patients away satisfied with the treatment they have received.

The new superintendent of nurses, Miss Minerva Harr, white, worked for two years in Puerto Rico with the Crippled Children's Bureau, says her present job is the most exciting she has ever had.

8-19-44

Trouble-shooting Louise Parker, in charge of nurses on the semi-private floor, watched to see white patients' reactions when colored were put in the same semi-private wards. She found no unpleasant reactions. Mrs. Parker, who graduated from the Harlem City Hospital School, has as assistant Mrs. Ludelle Delaney.

Men More Prejudiced

Miss Emeline Coffin, a supervisor, found men patients, both colored and white, more inclined to altercations than women patients. There has been no serious trouble, though, she is quick to indicate. Miss Coffin was one of the "old" Sydenham nurses, who stayed on when a handful of white nurses blew up and resigned when colored nurses were brought in.

8-19-44

Win Outside Praise

Physicians outside of the Sydenham staff are high in praise of the project. Said Dr. Floarda Howard, of the Harlem Hospital staff. "There is little other than praise for the hospital, hereabouts. Personally, I think the set-up is strictly on the up-and-up."

NAACP and Sydenham

People's Voice — New York, N.Y.

11-18-44

THIS WEEK'S restatement of NAACP opposition to the interracial Sydenham Hospital project looks like stubborn refusal to admit an error which was originally made in all good faith.

Since Sydenham's interracial service was begun last December, there has developed an institution where white and Negro doctors, nurses and patients enjoy identical privileges and services without even the semblance of racial discrimination. We, like NAACP, are eager to see this policy extended to all New York hospitals. Meanwhile, we applaud the one institution which has pioneered along the path we want all other hospitals to follow.

Races Mix from Trustee Board to Ward Patients

Afro-American — Baltimore, Md.

8-19-44

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25-1944 New York

A Dream of Negro Doctors Come True--Story of Sydenham Hospital

Daily Worker-New York, N.Y. 1-14-44

First Inter-Racial Hospital

By Eugene Gordon

The Sydenham Hospital, an imposing 11-story, fireproof structure at 123rd St. and Manhattan Ave., Harlem, is now a Negro-white voluntary hospital. It is, in other words, many a Harlem doctor's or nurse's dream come true.

A group of Negro physicians and surgeons, for instance, on June 10, 1938, appealed to the United Hospital Fund, 370 Lexington Ave., to help them in establishing such an institution. Among the signers of a letter to David McAlpin Pyle, president of the Fund, were such prominent leaders of the Harlem community and noted men of medicine as E. P. Roberts, E. Alexander, Louis T. Wright, Richard Carey and Arthur C. Logan. Their pledge to give "fullest professional support to such an institution when and if established" can now be carried out in the most progressive venture of its kind yet attempted in this city.

A HARLEM INSTITUTION

The Sydenham Hospital has 181 beds and 30 bassinets. It has full and complete facilities for clinical and research services. It has the unqualified approval of the American College of Surgeons.

"In recent years, as the population of Harlem has grown," says Joseph Martinson, president of the hospital, "it has opened its doors increasingly to the service of the people of its immediate community." 1-14-44

Its ward beds and out-patient department are used 90 per cent by residents of Harlem.

Mr. Martinson says that for many years individual directors interested in the work of the hospital have felt that the immediate community it serves should have an opportunity to share in its management. They felt also that all barriers of discrimination should be torn down. Says President Martinson:

"The steps which have now been taken are aimed primarily to better integrate the services of the hospital into the life of Harlem, preserving, at the same time, to a maximum extent, its interracial character, in order that the

The Rev. James H. Robinson, Joseph Martinson and a Negro and a white nurse in a room of the Sydenham Hospital, recently changed to New York's first voluntary interracial institution. Mr. Robinson, pastor of the Church of the Master, is chairman of the hospital's Organization Committee, the group which took the initiative along with the New York Urban League, in organizing the new setup. Mr. Martinson, widely known in business circles, is president of the hospital. 1-14-44

institution may not be used to further an undesired segregation of our Negro citizens."

NEGRO AND WHITE TRUSTEES

The change in the character of the Sydenham Hospital occurred on Dec. 20. The Board of Directors on that date voted to select 12 new trustees, six white and six Negro. The Negroes are A. A. Austin, president, Antillean Holding Co.; Alan L. Dingle, lawyer; the Rev. James H. Robinson, pastor of the Church of the Master; Ferdinand C. Smith, secretary, National Maritime Union; George W. Harris, former New York City alderman and once editor of a weekly newspaper; Mrs. Harriet Shad Butcher, superintendent, Russell Sage Foundation Building.

The six white trustees are William H. Baldwin, chairman, national board, National Urban League; Stephen P. Duggan, Jr., lawyer; Harry C. Oppenheimer, manufacturer; Frank M. Totton, vice president, Chase National Bank; Mrs. Frank S. Paley, wife of the president of Columbia Broadcasting Co.; Dr. William H. Kilpatrick, formerly professor in Teachers College, Columbia University.

One of the new Board's first acts will be, according to Mr. Martinson, "to change any of the existing policies which prohibit, in any way, the use of the hospital's facilities by all persons, regardless of race, religion or national origin." 1-14-44

This means that every person, according to his ability to pay, will have the right to the hospital's full services, either as a private (paying) patient in a private room or as a free or part-pay patient in a ward or in the out-patient department. Emergency ambulance service will be continued — in cooperation with the City of New York. The care of public charges will be continued with the city's paying a share of the cost. The hospital hopes to continue to enjoy affiliation with the United Hospital Fund and the Greater New York Fund.

We now come to one of the most, if not, indeed, the most, significant and important of all the changes in the Sydenham policy.

It will give Negro physicians opportunity for appointments on the medical staff—though, at first, the number will be comparatively small, representing between 15 and 20 per cent of the total. Mr. Martinson says, on this point:

"Before the time comes when Negroes might occupy a more prominent place in the medical services of Sydenham, **it is to be hoped that other of our voluntary hospitals will have broadened their policies to include Negroes upon their staffs.** Extending to Negro physicians this opportunity for service will give them the means for improving their medical competency, which can be realized only through affiliation with a hospital institution." 1-14-44

OPPOSITION GONE

The flareup of opposition to the new project has completely died out. The Manhattan Central Medical Society, embracing all qualified Negro physicians and surgeons, voted overwhelmingly, at its meeting on Jan. 8, to approve the project. That opposition arose, in the first place, over the mistaken belief by some Negro physicians that Sydenham was a subtle means of preventing the integration of Negro patients, doctors, nurses and personnel into existing voluntary hospitals.

The president of Sydenham dissipates that fear:

"We are aware of the dangers of a so-called jim-crow institution and we are all determined to guard against such a development with all our energies and resources. We believe that both colored and white persons can work together in an institution of this character and that the full facilities of the institution will be used by those persons who find its use necessary, regardless of color or belief." 1-14-44

"The success or failure of the Sydenham Hospital plan will depend, largely, on the attitude of other hospitals. Efforts must go on, therefore, to integrate Negro doctors, nurses and personnel into voluntary hospital staffs throughout the city.

It's Time for Jim Crow To Quit City Hospitals

PM-New York, N.Y. 1-13-44

It's high time that New York City, which boasts an official policy of racial equality, took concrete steps to break down the Jim Crow walls that bar qualified Negro doctors—with but few exceptions—from both city-owned and voluntary hospitals. The lead recently provided by Sydenham Hospital—once lilywhite, now inter-racial—should be followed at once on a citywide basis.

Most objectionable of all is the Jim Crow policy that dominates the medical staffs of both public and voluntary (private, non-profit) hospitals. City-owned Harlem Hospital, until recently, was the only institution accepting Negro doctors on its staff, regardless of qualifications.

Two other city hospitals, out of 28, have admitted a Negro to their medical staffs. Dr. George D. Cannon, connected with the Hospital for Joint Diseases in

tant door to Negro physicians and surgeons, shut tight to Negroes. Only three voluntary hospitals limited "courtesy privileges" to one or two Negro doctors.

In practical terms, this means that discrimination against Negro doctors in both public and private institutions bars them from the regular staff of a voluntary hospital; there are 95 such institutions in the city. 1-13-44

Of New York's approximately 450,000 Negro physicians—175 of them located in Harlem—all but a handful are without any hospital affiliation whatsoever. Any decent doctor will tell you that a hospital connection is vital to good medical practice. It keeps a man in constant contact with new developments in the medical field. Dr. Cannon, connected with the Hospital for Joint Diseases in New York City, has put his art. It keeps unbroken his supervision over a patient who has to be hospitalized. It breaks down

when they're hospitalized. 1-13-44

The Negro doctor finds himself victimized by a vicious cycle of discrimination in medical schools, deprived of true freedom in post-graduate work, internships, residencies and hospital staff appointments. It would seem that the medical institutions of this liberal city would arouse themselves to their duty to train good doctors.

and break the vicious cycle that bars Negro doctors from medical resources the[illegible]d their patients need.

By Albert Deutsch

Inter-Racial Hospital Seen As Blow Against Jim Crow

PM- New York, N.Y. 1-12-44

The transformation of the once lily-white Sydenham Hospital into an inter-racial institution may prove a decisive step toward breaking down the shameful boycott against Negro doctors observed in nearly all New York hospitals.

Sydenham is a well-equipped, 11-story, Grade A hospital located at Manhattan Ave. and 123rd St., on the western fringe of Harlem. Established 52 years ago, when the district it served was predominantly white, it has always accepted Negro patients in its wards. About 85 per cent of its ward patients now are Negro. But Sydenham, like most voluntary (private, non-profit) hospitals in the city, has heretofore barred Negro patients from its private rooms. Sydenham, like all but one of New York's 95 voluntary hospitals, never had a Negro doctor on its medical staff, or a Negro on its board of trustees.

In recent years there has been a movement to turn the hospital into a representative community institution, truly inter-racial, with no discrimination on its directorial and medical boards, and with full access of patients to all of its facilities, regardless of race. That movement, backed by the promise of financial support from foundations and individuals interested in inter-racial co-operation—in the face of a sizeable deficit—has finally been crowned with success.

The Sydenham Hospital authorities recently voted to add 12 new members to its directional board, including six Negroes. The character of the present 20-man board strongly indicates the permanent retention of the inter-racial policy. The medical staff of Sydenham has been thrown open to Negroes for the first time. Applications from Harlem doctors for appointments are being received; chances are that at least six will be approved as a starter. Negro medical students will be given the same opportunity for internship at the hospital as whites. Negroes have already been integrated on the nursing staff. 1-12-44

So far, so good. It would seem, on the face of it, that the Sydenham Hospital step would be welcomed by all Harlemites. The fact is that civic leaders in Harlem have been sharply split on the subject. There are some prominent individuals and groups who fear that the Sydenham inter-racial development, far from being a progressive step, may prove a boomerang.

These people argue, with complete sincerity, that the Sydenham transformation may serve to freeze the Jim-Crow medical pattern in New York hospitals. They point to the experience of the Provident Hospital in Chicago, which started as an inter-racial project and wound up as an all-Negro institution, with the white doctors and patients pulling out. They say that all other voluntary hospitals in the city may now try to sidetrack Negro doctors and Negro pay patients to Sydenham.

All these potentialities are inherent in the situation. They are always present when only one out of many hospitals turns inter-racial. But it is my own considered opinion, after carefully weighing the arguments on both sides, that the step taken by Sydenham Hospital is a healthy one. It deserves the support of all democrats who desire the breakup of the baneful color line. It is now up to all of us to see that the Sydenham step serves as a spearhead in a city-wide offensive against Jim Crow in hospitals, and not as a blind alley blocking further action. 1-12-44

One very encouraging factor in the situation is that the Sydenham Hospital officials themselves recognize the possible dangers that may develop unless the inter-racial hospital movement is carried forward.

"Whether Sydenham Hospital will be able to attain the goal of a truly inter-racial institution," says its president, Joseph Martinson, "will in substantial measure depend upon the attitude of other hospitals. . . . We believe that such an institution cannot be regarded as a movement to foster segregation. On the contrary, it is our feeling that through this pioneering accomplishment at Sydenham, a pattern has been set in the hospital world which will serve in guiding similar endeavors both in New York City and elsewhere in the country."

Protest 'Interracial' Hospital In Manhattan

Defender- Chicago, Ill.

1-8-44

NEW YORK—Pointed protest was registered this week by many organizations and civic leaders here to the announcement that Sydenham Hospital, 123rd street and Manhattan avenue, has been reorganized as an "interracial voluntary hospital," and that six Negroes have been elected to the board of trustees.

The new setup was viewed by many as too hastily made and in the nature of a "squeeze play," since the reorganization meeting was held only five days after telegrams had been delivered to 300 persons in Harlem asking their opinion on such a hospital.

The Citizens Committee for Adequate Medical Care, headed by Judge Charles E. Toney, Mrs. Ruth Logan Roberts and Dr. Richard M. Carey, posed the question:

May Have Jim Crow Aspect

"What guarantees have been set up by the organizing committee, under the chairmanship of the Rev. James H. Robinson, against this interracial voluntary hospital becoming in fact a strictly Negro institution, a jim crow hospital?" The Citizens group continued:

"This committee views the possibility of jim crow hospitalization and medical care in New York City as a grave danger to both the Negro doctor and the Negro patient, and we feel that full and frank discussion of this important aspect of the project should have taken place before the reorganization was begun. The organization committee, we believe, owes it to the responsible elements in the Harlem community, both medical and lay, to explain its plans for guarding against jim crow. In this connection we understand that the Manhattan Central Medical Society, the official organization of doctors in Harlem, was not consulted on the specific Sydenham plan of reorganization.

"Interracial" Hospital Not Needed

"It has been declared that the Sydenham project is designed, among other things, to speed the integration of Negro doctors into the staff of voluntary hospitals throughout the city, and to act as a pattern for the rest of the nation.

"It is difficult to see the necessity for creating an "interracial" hospital, labeled for the benefit of a particular racial group, to accomplish this end. It would seem that the simple and direct method would be to elect immediately those qualified Negro physicians to the staffs of existing hospitals. Especially is this true in the light of the war time shortage of doctors.

"This citizens committee has been organized hastily because these questions have arisen in the minds of many Harlem residents and we feel that the sponsoring committee of the Sydenham project is obligated to make answer. 1-8-44

"There is the distinct possibility that this effort could become a segregated project. In New York City, regarded as the most democratic of American cities, this trend to jim crow could have only the worst effect upon the rest of the nation.

"In fact, in the field of medicine, the emergence of a jim crow pattern here would be contrary to the trends of recent years. Nine years ago Negro nurses were functioning in only five of the 29 municipal hospitals. Today they are in all 29. Moreover, they are in 10 voluntary hospitals.

"We recognize that there are problems in hospitalization and medical care for Negroes in New York, but unless the proper safeguards are inherent in the new Sydenham plan, these problems will be made more complicated and difficult of solution, instead of less so."

N.A.A.C.P. Protests

Further protest on the announced reorganization of Sydenham hospital as an "interracial voluntary hospital" was contained in a letter to Mayor F. H. LaGuardia this week from Walter White, N.A.A.C.P. secretary. 1-8-44

The proposed reorganization was characterized as "a step backward, not forward, in that it comprehends acceptance, on the part of the city and its citizens, of the theory of racial segregation."

"It is not necessary," the letter said, "to go to the formality and trouble of creating a new institution for the reason that racial prejudice excludes Negro physicians from the staffs of existing institutions, save Harlem and one or two other municipal establishments. All that is necessary to be done, is the proponents of this project are sincere, is to elect qualified Negro physicians and surgeons to the staff of Sydenham now, and to hold open the door to others as they are able to qualify."

Plans for Mixed Hospital in Harlem Gain Supporters

Afro-American-Baltimore, Md.

1-1-44

Proposed Institution to Be Void of Color Bar from Board to Ward Accommodations

NEW YORK — Numerous per-[illegible] principle in other hospitals and organizations of Greater [illegible]pitals.

New York have gone on record [illegible]. Among the persons on the Rev. as whole-heartedly supporting the Mr. Robinson's committee, which plans for an interracial voluntary both backs the plan and elicits hospital in Harlem, stated the [illegible]tin, of the Antillean Holding Rev. James H. Robinson, chair- Company; Alan L. Dingle, attorman of the hospital committee. ney; Lester B. Granger, National

The proposed hospital, to be Urban League, and William H. staffed by colored and white, and Kilpatrick of the New York Urban to cater to patients from both League. 1-1-44

groups, has as its goals greater **Interracial Principles**

contribution to the care of the The committee released five sick and will attempt to set a hospital principles by which the proposed pattern for initiating the inter- is to be governed. It is to be managed by a lay board

Sydenham Hospital Opens Fund Drive

World-Telegram New York, N.Y. 1-8-44

A fund-raising campaign for $350,000 in furtherance of its recently initiated policy of offering internships and treatment to all races was launched yesterday by trustees of Sydenham Hospital, 123rd St. and Manhattan Ave., under the honorary chairmanship of Newbold Morris, City Council president.

Under the new policy, the institution now has two Negro internes, 23 Negro medical staff members and 31 Negro graduate nurses.

Three persons, Dr. Louis T. Wright, Dr. Myra Logan, and Mrs. Ruth L. Roberts, went on record as opposing the establishment of the voluntary hospital.

They agreed with Dr. Wright that what New York needs is less discriminatory practices against colored in all sixty tax-exempt voluntary hospitals of the city.

25-1944

New York

Harlem Divided Into 2 Camps Over Conversion Of Sydenham Hospital Under Interracial Voluntary Plan

Age- New York N.Y. 1-8-44

Will Sydenham Hospital, which, on December 20th voted to become an interracial voluntary hospital and named six Negroes to its trustee board, set the pattern for the extension of jim crow into hospitals of New York City?

That was the big question which found Harlemites divided into two camps, one claiming that the plan had ulterior motives and was a setback to Negroes in the medical profession. 1-8-44

Opponents of the Sydenham Hospital plan have organized the Citizens Committee for Adequate Medical Care with Judge Charles E. Toney and Mrs. Ruth Logan Roberts as co-chairmen, and Dr. Richard M. Carey, secretary. Prominent among those actively identified with this group are Walter White and Roy Wilkins, top executives of the NAACP; A. Philip Randolph, international president of the Brotherhood of Sleeping Car Porters; Anne Arnold Hedgeman, OCD race relations advisor; and Rev. E. E. Durant, rector of St. Ambrose Episcopal Church.

This committee declared on Sunday that "we are inflamed by the proposed reorganization of Sydenham Hospital. We resent any special arrangements planned expressly for Negroes, or any other minority. Such arrangements become doubly offensive when, for the first time, in New York City, a welfare facility, using tax monies, is so planned. We believe that Negro patients, doctors and nurses must have the same professional opportunities as any other citizens, in all voluntary hospitals. The Sydenham plan will eventuate in the old pattern of segregation, so firmly established in the hospitals of the south. In New York, it is being disguised as an 'interracial project.' The result is the same. We resent, and will fight, this extension of jim crow into New York City.

"The reorganizers of Sydenham did not discuss their proposals with representative organizations of local doctors or nurses. The community at large was consulted only by means of a high pressured, nobly worded, day letter, sent to a few people, requesting approval, in absence of adequate facts or discussion. 1-8-44

"Encouraged by the proposed hospital segregation of Manhattan Negroes, Brooklyn has already planned a jim crow hospital.

"We urge an immediate drive to further integration of Negro patients, doctors, nurses, and personnel into existing voluntary hospitals, without any reorganization of finances or staff, for their benefit. Simple justice is adequate. Any other proposal delays the complete integration which is necessary for good medical care for all citizens."

Hospital President Explains

On December 29th, Joseph Martinson, president of Sydenham Hospital, explaining the changes and expressing the hopes of the board of directors, wrote to Mayor F. H. LaGuardia that: "We recognize the extreme care with which a new program of this sort must be guided as it is developed in the future. We are aware of the dangers of a so-called 'jim crow' institution, and we are all determined to guard against such a development with all of our energies and resources. We believe that both colored and white persons can work together in an institution of this character, and that the full facilities of the institution will be used by those persons who find its use necessary, regardless of their color or belief.

"Whether Sydenham Hospital will be able to attain the goal of a truly inter-racial institution which is so auspiciously begun, will in substantial measure depend upon the attitude of other hospitals. It is fortunate that there now exists in the community an Organization Committee to Establish an Inter-Racial Voluntary Hospital in the Harlem area, which, composed of some fifty eminent leaders among our white and Negro community, has adopted the dual objective of bringing about the establishment of a hospital such as Sydenham now presents the community, and at the same time, of working for an integration of Negro physicians and other workers into the staffs of appropriate hospitals throughout the city. The present accomplishment of Sydenham provides one important answer to the objectives of this Commitee, and Sydenham is happy to say it will generously cooperate with the Committee in the accomplishment of its second objective. 1-8-44

"We are committed to the policy of an inter-racial hospital in Harlem because we firmly believe that no community of 300,000 persons such as is represented by Harlem shold be served by institutions which are not fully and sensitively responsible to that community. We believe that such an institution cannot be regarded by any persons or groups as a movement to foster segregation. On the contrary, it is our feeling that through this pioneering accomplishment of Sydenham, a pattern has been set in the hospital world which will serve usefully in future years in guiding similar endeavors both in New York City and elsewhere in the country." 1-8-44

Sydenham Hospital, located at Manhattan avenue and 123rd street, is a modern eleven-story fireproof structure with full and complete facilities for clinical and research services. It has 181 beds and 30 bassinets. At the present time, its ward beds and out-patient department are used ninety per cent by residents of Harlem.

SYDENHAM HOSPITAL

Age- New York, N.Y. 1-8-44

SYDENHAM HOSPITAL is the storm center of a controversy, all because it has been announced that it is prepared to function as an inter-racial hospital, staffed by Negro and white physicians and with a board of trustees of Negro and white citizens.

Sydenham Hospital is the storm center of the controversy because a group of Harlem citizens, under auspices of the New York Urban League, not only advocated the inter-racial voluntary hospital plan but also saw it adopted by trustees of the hospital.

Sydenham Hospital is the storm center of the controversy because another group of Harlem citizens feels that "the whole project has a background of many years' standing during which numerous attempts have been made to establish a jim crow hospital in Harlem. The present proposal contemplates the turning over of a hospital in the Harlem area which now has a few Negro doctors on its courtesy staff, but which has never elected a Negro physician to its regular staff."

Sydenham Hospital is the storm center of the controversy because there are some citizens who forget that a hospital is an institution for the reception and treatment of sick and injured people, and is designed to be a place merely for such treatment, not the battleground or the place in which two schools of thought clash while the suffering patient continues to suffer.

The New York Age, let it be understood, was among those in the forefront of the fight against a jim crow hospital such as was planned some years ago by the Rosenwald Foundation. The New York Age is still opposed to segregated or jim crow hospitals. But we are not so blind that we cannot see.

Under the present plan, Sydenham Hospital has expanded its board of trustees to include six Negro members. They, added to six new white members, will constitute the membership of the board which will be 23 in all. In other words there are 17 whites and 6 Negroes on the board, and the membership of the board is so constituted that there is little likelihood that anything can be inaugurated at the hospital against the best interests of Negroes. 1-8-44

The New York Age does not see eye to eye with those opposed to the Sydenham Hospital plan that by accepting the hospital as an inter-racial hospital it is setting a pattern for future hospitals to institute. In the first place there are few of the city's hospitals, with the notable exception of Harlem Hospital, where there are any appreciable number of Negro physicians on the staff.

Are we as a race, then, to lose temporary gain or advantage because some one or group feels that we are setting ourselves apart and are fostering segregation? Being realistic about it, we must admit that we have set ourselves apart. We pride ourselves on being Negroes; we set up Negro businesses and institutions of learning; we attend Negro churches; we publish Negro newspapers; we are Negroes and we think as Negroes. But withal we fight against further proscription and segregation, and fight for integration. Are we suddenly to cast all that aside and proclaim that we will not accept anything else proferred to us as Negroes? Are we to lose sight of the fact that every advance that we as individuals make also advances the race?

There may be some aspects of the Sydenham Hospital plan which will develop not to our liking; if so we will be vigorous in condemning it. But in the meanwhile we accept the Sydenham Hospital plan and do not intend, by opposition, to throw any bricks or erect barriers which will militate against the succesful carrying out of the fundamental principles of the sponsors. After all one can better fight an evil being on the inside than by being on the outside looking in.

Dr. Tobias Denies Recorded In

Amsterdam News 2-5-44

Sir: A few days ago my attention was called to a communication in the Correspondence Section of the January 15th issue of the AMSTERDAM NEWS, under the heading, "Says Leaders Need To Do Better." The letter was signed, "Harlem Mother," and addressed itself to a scurrilous attack upon me, containing among other things the following:

"Rev. Channing H. Tobias came to our apartment last Friday with a petition and said he and Walter White of the NAACP and others were fighting the reorganization of the Sydenham Hospital with a proposed mixed board of trustees, a mixed medical and surgical staff and mixed patients and that I have taken, both in private conversations and in petitions that there need a voluntary hospital as the other great hospitals admitted Negro patients to all

My blood began to boil. I said 'Reverend! don't you know that there is hardly a single one of the hospitals or sanitariums that admit colored patients equally and none of them have colored doctors on the staffs?'"

Tobias' Record of Service

I was surprised that your newspaper would publish a communication under a fictitious name concerning my attitude to a petition to the Correspondent of 15th and 16th of the AMSTERDAM NEWS, Sydenham Hospital. FIRST, let me say as to the contents of the attack that I have no time and in the interest of noletter contained without first consulting me to find out whether there was any basis in fact for the statements contained in it. This is a petition circulated as cause SECOND, the position ascribed

of course not compulsory, but it is the courteous and the usual thing to do. I would rather feel that failure to show this courtesy was due to oversight on the part of your Editorial Office and not to any deliberate intention that the vicious contents of this communication should reach the public.

Fortunately, after thirty-two years in public life I do not have to convince those who know of my record of service that this letter was a tissue of lies, for they had only to read it to be convinced of that fact. But for the benefit of those who may not know me, I am respectfully requesting that you give prominent space and heading to this communication, and make a statement on behalf of the paper bearing out the fact that the original letter was not found and that the name of its author has not been established.

Channing H. Tobias.

EDITOR'S NOTE: The Editors of the AMSTERDAM NEWS have always considered Dr. Channing H. Tobias to be one of our most outstanding and capable leaders. We regret, therefore, the publication of the letter about Dr. Tobias, referred to in his letter printed above and assure him that it was the result of an oversight that such a communication was permitted to appear.)

Segregation: The Pattern Expands

Courier- Pittsburg, Pa. 1-29-44

The statement of eleven leading Negro doctors of Harlem on the methods by which that Negro community woke up one fine morning to find a segregated hospital in its midst, is very illuminating and it is to be hoped that it will serve to place Negroes everywhere on their guard.

It appears that under the guise of interracialism and with the ostensible purpose of furnishing more beds for the Negro sick of the community and medical education for Negro doctors, the colored people were brought to approve what in other directions they have long been fighting.

The eleven Negro doctors protesting against this set-up point out that since the hospital in question is already filled with Negroes, no additional beds have been made available to the community.

They are also suspicious that this jim crow institution is just another link in the chain of such hospitals gradually being completed all over the country, and intended to eventually shut Negroes out of other medical institutions.

In support of their contention, the doctors point out that the control of the hospital remains in white hands, that the change-over was conceived in secrecy, and that already there is talk of offering post-graduate facilities in a city already having the best post-graduate schools in the world. 1-29-44

There are many opportunists in the colored group who are always insisting on the half-a-loaf-is-better-than-none philosophy, and are always willing to throw principle overboard for what appears to be immediate advantage. They are as gullible as they are dangerous.

History has proved that they are wrong and will continue so to prove.

We must beware of Greeks bearing gifts. When we compromise with evil, we soon become the victims of evil.

High Point Reached in One Year Battle:

People Voice - New York, N.Y. 2-12-44

New Physicians Bolster Sydenham Hospital Staff

Special

A high point in the year-old campaign to integrate Negro medical personnel into city hospitals was reached this week with the Medical Society of the County of New York (MSC) announcing a 14-point plan which for the first time includes Negroes, and with Sydenham Hospital accepting 80 per cent out of the group of Negro doctors applying for staff positions. The National Maritime Union encouraged developments by a $2,000 donation to the Sydenham interracial project, and for the first time a Negro interne was accepted into a voluntary general hospital.

In his inaugural address before the MSC, Dr. Conrad Berens assailed complacency and warned that the medical profession is due for an "overhauling." Three of the 14 points outlined definitely affected Negro physicians and their communities:

- the education, hospital training, practice and certification of Negro physicians;
- the development of adequate hospital facilities where most urgently needed;
- the study of conditions which interfere with the practice of medicine to the detriment of public health.

2-12-44

The other points touched on plans to meet the needs of moderate and low income groups, closer cooperation with government, labor, industry and social agencies for the prevention and treatment of diseases.

Dr. Peter Marshall Murray, chairman of the committee to formulate a program to carry out the plans relating to Negro doctors and communities will work with the Manhattan Central Medical Society on the recommendations.

One of the major handicaps to Negro physicians is the meeting of technical qualifications demanded by hospitals for high staff positions. To hold a position of "full resident" or visiting status, a physician must be a member of the American Medical Board of the American College of Surgeons. The American Medical Board jimcros.

In the case of the American College of Surgeons, a requirement for membership is that a doctor must specialize exclusively without general practice. This works a distinct hardship on worthy and capable members who must make a living through general practice.

These are the problems that must be taken up if hospitals are not to lower standards in order to do justice to highly qualified Negro doctors.

Applications both for renewal of staff jobs and new positions are made to all hospitals in December. It was about this time that the interracial project first started. The Manhattan Medical Society urged its members to apply at the meeting in which they endorsed the project. This left barely two weeks to apply. As a result, a bi-annual filing of applications may be invoked for Sydenham since only 15 doctors applied.

Both Negro and white physicians were accepted and rejected for Sydenham. No "clique" moved in, and the only difference in the appointments to those of other Negroes appointed to white hospitals, it was pointed out, is the number.

policy of throwing open its application lists for internes to qualified medical graduates of all races and now has two Negro internes, twenty-three Negro medical staff members and thirty-one Negro graduate nurses.

City Council President Newbold Morris is honorary chairman of the drive. The drive is under the active chairmanship of Harry C. Oppenheimer, with Mrs. William Paley, Paul Robeson, Judge Jonah J. Goldstein, William C. Lord and the Rev. A. Clayton Powell Sr., as vice chairman. In addition to the city-wide campaign, there will be a special drive in Harlem.

HOSPITAL SEEKS $350,000

Times—New York, N.Y. 7-5-44

Sydenham to Have Special Drive in Harlem in its Campaign

Sydenham Hospital announced yesterday that it had opened a campaign for $350,000. The hospital, at 123d Street and Manhattan Avenue, initiated last December a

What Other Editors Say

Age—New York, N.Y. 7-1-44

A CHANCE FOR NEGRO DOCTORS

Last December Sydenham Hospital decided that it would admit any qualified Negro into the ranks of its internes, resident physicians, surgeons and nurses, and that Negroes would also be represented on its board of trustees. The decision was acclaimed by those who have long been convinced that the color line is an anomaly in any branch of science. Among those who thus acclaimed it was the Medical Society of the County of New York, which passed a resolution that urged the acceptance of asi milar policy by acceptance of a similar policy by all voluntary hospitals.

Whether or not Sydenham's experiment succeeds depends largely on community support. Hence the campaign for $300,000 which has opened. That Negroes will make their contribution there can be no doubt. Apart from this, support should be forthcoming because of the urgent need Harlem, the greatest urban Negro center in the world, has a mortality rate which is disgraceful to any city—a rate 36 per cent higher than the average for all the boroughs. The death rate from tuberculosis alone is six times that of the whole city, among his own people. If Sydenham's maternity mortality three times as high, venereal disease registration 46 per cent above that of the next highest section. Better housing, one important corrective, cannot be much longer deferred, but the immediate need is for better medical care. Provide that, and not only will Harlem be the gainer but the young Negro physician, whose way has always

7-1-44

25-1944

New York

SYDENHAM HOSPITAL ADDS NEGROES TO ITS BOARD IN INTER-RACIAL VOLUNTARY PLAN

Age-New York N.Y.

Opponents Of Plan Form Committee Headed By Mrs. Ruth L. Roberts

1-1-44

While Rev. James H. Robinson, chairman of the organization committee for an inter-racial voluntary hospital in the Harlem area, was announcing that the plan will go into immediate effect at Sydenham Hospital, Manhattan avenue and 123rd street, another group of prominent Harlem citizens, with Mrs. Ruth Logan Roberts as chairman, announced organization of a committee opposed to the plan, as the first step toward a complete jim crow set-up.

Joseph Martinson, president of the 52-year-old Sydenham Hospital, announced on Monday that Sydenham "is being so organized as to provide qualified Negro physicians through staff positions with opportunities to hospitalize and care for their own patients and to improve their own medical competency. The hospital will provide private or ward accommodation just as other voluntary hospitals. "This hospital," he said, "is founded on the principles of equality in every phase of its professional and scientific being."

As the first step in putting the hospital on an inter-racial basis, the hospital's board of eleven was augmented by twelve additional members A. A. Austin, William T. Baldwin, Alan L. Dingle, Stephen P. Duggan, jr., Rev. James H. Robinson, Ferdinand C. Smith, George W. Harris, Mrs. Harriet Shad Butcher, Harry C. Oppenheimer, Mrs. William S. Paley, Frank M. Totten and Dr. William H. Kilpatrick. 1-1-44

Committee Of Opposition

Among those who have joined Mrs. Roberts in opposition to the plan and who have accepted membership on a committee to fight it, are: Walter White and Roy Wilkins, of the NAACP; Frank Crosswaithe of the Negro Labor Committee; Dr. Louis T. Wright, noted surgeon; A. Philip Randolph, president of the Brotherhood of Sleeping Car Porters; Dr. Richard Carey, and Mrs. Ernest Alexander.

The committee, in a release issued by the NAACP, said that the plan was financed from "mysterious sources" pointing out that on "December 14 a telegram of more than 300 words was sent to several hundred New Yorkers asking their opinion on the establishment of such a hospital. The huge telegram bill was said to have been paid by the New York Urban League out of a fund of several thousand dollars made available to it by white people"

In his letter to the sponsors of the project, Roy Wilkins assistant secretary of the NAACP, declared that he could not endorse the interracial hospital project because "it is my firm belief that instead of setting a 'pattern for initiating interracial principles in other hospitals' of the city, this project will be the opening wedge in completely segregated pattern."

The NAACP release declared that the "Urban League telegram.... was so worded as to be confusing, and many persons are indignant over the attempt to put them on record as voting for such a proposition. The whole project has a background of many years' standing, during which numerous attempts have been made to establish a jim crow hospital in Harlem. The present proposal contemplates the turning over of a hospital in the Harlem area which now has a few Negro doctors on its courtesy staff, but which has never elected a Negro physician to its regular staff." 1-1-44

The 11-story Sydenham Hospital was founded in 1892, has 181 beds, 30 bassinets, and has been approved by the American College of Surgeons, and according to Rev. Robinson's committee "will provide for the first time in Harlem, a voluntary inter-racial hospital having all the rights and privileges of other voluntary hospitals in New York, such as tax exemption, support by the city, support from the Greater New York Fund and United Hospital Fund, and taking its place on a parity with New York's 86 other voluntary hospital institutions."

Urban League Blamed for Jim Crow Hospital Plan

Tribune-Washington, D.C.

1-8-44

NEW YORK, N. Y. — An elaborate plan, financed from mysterious sources, to establish an "interracial voluntary hospital" in Harlem has been branded as the first step toward a complete jim crow set-up by a number of leading Harlem citizens.

On December 14 a telegram was sent to several hundred New Yorkers asking their opinion on the establishment of such a hospital. The huge telegram bill was said to have been paid by the New York Urban League out of a fund of several thousand dollars made available to it by white people. 1-8-44

A citizens committee opposed to the hospital is being organized under the chairmanship of Mrs. Ruth Logan Roberts. Among those who object to the project are Mrs. Roberts, Walter White and Roy Wilkins of the NAACP, Frank Crosswaith of the Negro Labor Committee, Dr. Louis T. Wright, surgeon, A. Philip Randolph, president of the Brotherhood of Sleeping Car Porters, Dr. Richard Carey, and Mrs. Ernest Alexander.

'Not Right,' Peoples Voice Says Wright

New York, N.Y. 1-22-44

Dr. Louis T. Wright, surgical director of Harlem Hospital, insisted this week that he had not changed his position of disapproval of the Sydenham Hospital interracial plan, but that he is "convinced that the Sydenham Hospital plan, because of the inherent dangers of increased segregation concealed therein is a backward and not a forward step in the total fight against jimcroism."

However, *PV* last week quoted Dr. Wright verbatim. He said, 'the Manhattan Medical Society at its January 5 meeting voted overwhelmingly its approval of the Sydenham Hospital project. I can only speak for myself personally, since for physical reasons I could not be active, and that is I am a member of this group of physicians and I abide by their decisions."

Those interested in the plan who feel that Dr. Wright's fears are unwarranted, point out the following facts: 1-22-44

- the Sydenham project was not proposed as a sole answer to the problem of integrating Negro medical workers into all hospitals, but that it was only one feature in a program to open all hospitals;
- Sydenham could not be staffed completely by Negro physicians since there are only about 160 in all Greater New York. Some of these are in white hospitals, and calls have been made for more Negro doctors for other hospital staffs;
- white medical workers will not be displaced by Negro workers. The white doctors will not leave and will continue to bring their patients, thereby insuring the interracial character of the institution; 1-22-44
- Negro physicians on the Sydenham staff will also work on other hospital staffs, for example, some are already scheduled to work interchangeably with the Hospital for Joint Diseases;
- one of the reasons there are so few Negro doctors in New York is that Negro medical students had no voluntary or private hospitals in which they could do their internship. Sydenham offers this opportunity now.

Dr. Louis T. Wright Denies Statement Before Medical Society Okayed Sydenham Hospital

Age-New York N.Y. 1-22-44

In commenting on the approval of the Sydenham Hospital plan recently voted by the Manhattan Central Medical Society, Dr. Louis T. Wright, surgical director of Harlem Hospital, sharply differed with the interpretation placed on his statement to the Society which read:

"The Manhatan Central Medical Society at its January 5th meeting voted overwhelmingly its approval of the Sydenham Hospital project, changed my position from one of but I certainly did not mean that I had yielded my right of independent opinion or action on the subject, nor did I mean that I would not resign from the Society because of our difference of opinion. I continue and shall continue to withhold my approval of Sydenham Hospital."

Hospital Fight Peoples Voice Gets Hotter; Feud Flares

1-8-44

By LLWELLYN RANSOM [Fotostat Cols. 4-5]

The battle of Sydenham Hospital raged this week between those who support it as an interracial voluntary hospital and another step toward the fuller integration of Negro doctors, nurses and other technical workers into the staffs of existing public and voluntary hospitals. New lines were drawn, accusations and challenging questions hurled by those who acted as chairman of the proposed extension committee and reinforcements brought up by the opponents of the project. A new committee known as the Committee for Adequate Medical Care, sent out a 300-word telegram to counteract the one sent out recently by the Urban League polling the community's opinion on the new venture. It urged "organizations and individuals to reconsider the question immediately."

WITHDRAW OPPOSITION

The executive board of the Baptist Conference met Monday, and ordered withdrawn a resolution it had passed last week condemning the Sydenham plan of integration. The executive board of the NAACP met the same day and drawn, accusations and questions Reverend James H. Robinson, one of its board members who acted as chairman of the organization committee and

Special

"The above statement," said Dr. Wright, "has been grossly misinterpreted. I made the statement because of the inherent dangers of segregation concealed therein as a "disguised entrance of jimcro into New York." 1-22-44

who is now a member of the new-it will behooves the healing art
ly formed board. to be the company of John Rankin

One of the most persistent and Cotton Ed Smith."
complaints from the opposition is A PATTERN SET
that the Manhattan Central Med- In reporting to the Mayor that
ical Society was not consulted, it had augmented its board of
This Harlem medical society was trustees twelve new members, six
scheduled to meet Wednesday of whom are Negroes, it said, "We
determine and declare its official believe that such an institution
position in the hospital cannot be regarded by any per-
versy. Both sides predict the so- foster segregation, on the con-
ciety will side with each. trary . . . a pattern has been set

In support of its prediction, in the hospital world which will
the supporters of the inter- serve in guiding similar en-
racial idea submit the fact that deavors." 1-8-44
on December 10, 1938 the med-

Answering the opposition's de-
ical societies of Harlem ad- mand for a guarantee against
dressed a petition to the United future jimcro, Rev. James H.
Hospital Fund, asking it to en- Robinson said, "the guarantee is
dorse the establishment of a the integrity of the type of peo-
voluntary hospital in view of ple who are on the board of di-
the overwhelming need for rectors and the philosophy upon
such an institution in this com- which the committee based its
munity, and pledged "our fullest work. The Negro members are,
professional support to such an A. A. Austin; Alan L. Dingle;
institution . . . and promise our Rev. James H. Robinson; George
active, moral and financial sup- W. Harris; and Mrs. Herriet
port to any campaign that may Shad Butcher.
be started for the purpose of PV learned from reliable
raising the necessary funds." sources that Brooklyn is acting

They point out that some of to bring about similar integration
the present objectors were on the in hospitals there.
executive board that sponsored
this petition. 1-8-44

IS FIRST STEP

To the ever-recurring argument that the proper procedure to fuller intergration would be to place Negro medical people on existing voluntary hospitals, the supporters say that this end has been sought for 25 years in Harlem, with little results in voluntary hospitals. They say that the Sydenham project is only one step in their plan of campaign drawn up a year ago to work for the long-sought goal.

"Instead of encouraging jimcro," says Secretary Goode A. Harney of the Urban League, "since the Sydenham experiment, other hospitals have been calling for Negro specialists to fill positions on their staffs." The doctors of Sydenham, seeing the change as a challenge to the progress of medical science, are staying to pioneer, he points out.

The New York Times said, "Sydenham points the way . . . in sweeping away anachronistic barriers based on race." The Post, congratulating the hospital for adding six Negro members to its trustee board, said, "We hope other hospitals will follow suit.

Interracial Hospital Pleases Mrs. Roosevelt 1-7-44

Mrs. Eleanor Roosevelt today toured Sydenham hospital, described as the first in the nation to become interracial, and called its policy a "very encouraging demonstration" of the ability of Negro and white physicians, employes, and patients to get along together.

After visiting patients, clinics, and laboratories, the wife of the President told a press conference she was enthusiastic about the "cooperative attitude" she said she had noted. 1-7-44

Two Negro reporters called her attention to a news story from Evergreen, Ala., quoting her as saying she never had made a stand for social equality for Negroes. The reporters asked her for a definition of social equality and she replied: "Social equality to me is what you have among friends and I don't see how you can legislate about social equality."

SOAPBOX -- by Adam Clayton Powell, Jr.

POWELL

People's Voice - New York, N.Y.

IT IS ABOUT TIME that the two groups warring on the Sydenham Hospital project should come together. Charges of jimcro are not valid because there are no facts to support these charges. If we keep on arguing and bellyaching, old man jimcro might easily slip in. 2-5-44

We receive press releases each week damning and praising our new interracial hospital venture. We are, in turn, damned, and frequently by our friends, because these releases are not printed. The truth of it is they are not news releases. They are statements.

Too many statements have already found their way into our columns. We have been fair and printed each week both sides of the question. As far as we are concerned, the controversy over Sydenham Hospital has come to a close. We are not going to print any more pros or cons unless some real facts are brought forward. If at any time there occurs any incident which in any way indicates that jimcroism is creeping into Sydenham Hospital, we will immediately throw open the columns of this paper for the printing of such facts.

I have no illusions about the problem of voluntary hospitals and the Negro. There are plenty of people who would like to see Sydenham Hospital become a segregated institution. But if we make up our minds to fight together so that it shall not be one, then **it will not be one.** No cause is ever helped by sitting outside throwing rocks. It is only when we get inside and make it tick that ideals are realized. This is the challenge that Sydenham Hospital offers every doctor, nurse, and citizen of not only Harlem but all New York.

We must immediately continue our fight against jimcroism now being practiced in nearly every other hospital in New York. We must keep on fighting for more opportunities for Negro professional men and women. This will be the best way to safeguard our local project. 2-5-44

The days of cliques controlling anything that belongs to the people are passing. These are days that call for unity. if our leadership does not realize this, then they should know that the people are united as never before. If unity won't come from the top, it will come from the bottom. In fact, it has already come. This is something that the ivory tower boys can't realize.

Sydenham Hospital is what the people wanted because it is what they need. This community has struggled along for years with only a four-story converted private house as its hospital facility. Harlem as a city is the eighteenth largest in America and I don't care where you go you won't find a town one-tenth the size of Harlem with voluntary hospital facilities as poor as they have been. The truth of it is, Sydenham merely scratches the surface. 2-5-44

It is to be hoped that when the appointments are made a capable man of our race will be invited to serve, irrespective of what part he has taken in this discussion. That will be the final test of whether this hospital is to be ruled by a clique. I don't think it will be and so until proven otherwise, I am with the project one hundred percent. In the language of the streets—**"Period."**

MRS. ROOSEVELT PRAISES 'MIXED RACE' HOSPITAL

Tribune - Chicago, Ill.
1-7-44

25-1944

GROUP TO VISIT NEGRO HOSPITAL

Raleigh ... Observer

... 3, 1944

Commission To Begin Study of State's Care of Feeble-Minded Negroes

Goldsboro, April 2.—(AP)—The commission named by Gov. Broughton to make recommendations to the next General Assembly relative to the care, treatment and training of Negro feeble-minded children in the State will begin its work at a meeting here Thursday, Senator Thomas M. O'Berry, chairman announced.

The five-man commission will meet in the office of Senator O'Berry at noon, go to the State Hospital for Negro Insane for an inspection tour, and then will meet with the executive committee of the hospital for compilation of data.

The meeting was called on the date because the executive committee of the hospital had scheduled a meeting at that time to discuss post war plans.

R. G. Deyton, assistant director of the budget, and R. M. Rothgeb, general manager of the State hospitals, will meet with the groups.

The resolution of the General Assembly authorized the appointment of a commission consisting of five members, "to inquire into the actual conditions, care, treatment and training of these unfortunate children, to the end that they may be under the supervision of people skilled in giving the right kind of care to these mental defectives."

The resolution further provides that "the said commission shall likewise make an investigation as to the possibility of securing additional facilities at Goldsboro, or elsewhere, for institutional care and treatment of Negro feeble-minded in the State."

The commission is directed to make its report to the Governor at least 30 days prior to the convening of the next session of the General Assembly. The Governor in naming the commission appointed two members of the Senate and three members of the House, as follows: Senators Thomas O'Berry of Goldsboro and K. A. Pittman of Snow Hill, and Representatives W. Frank Taylor of Goldsboro, Robert P. Burns of Roxboro, and Charles F. Honeycutt of Clinton.

Raleigh, N. C. News & Observer

January ... 1944

NEGRO HOSPITAL WORK STARTED AT DURHAM

Richmond, Va., Jan. 13.—Construction of additional facilities at Lincoln Hospital in Durham, N. C., to provide accommodations for Negro student nurses enrolled in the U. S. Cadet Nurse Corps who will be trained at the hospital, has been started by the general contractor, T. W. Poe and Son of Durham, according to information received from hospital authorities by Kenneth Markwell, regional director of the Federal Works Agency.

The work will include alterations to a two-story frame dwelling on the hospital grounds, which will be used as a nurses' home, and construction of a one-story brick and frame addition to the hospital building, to enable the hospital to expand its dining room and kitchen facilities.

The hospital at present has accommodations for 59 nurses. The proposed facilities will permit the hospital to enroll 21 additional students in its training school for nurses. The cost of construction and equipment will be financed by the Federal Works Agency through a grant of $38,600 from Lanham Act funds. The project is scheduled to be completed by May 7.

A Strange Piece Of Legislation

Journal & Guide
Norfolk, Va. 2-26-44

THE recommendation of Governor Darden that Piedmont Sanatorium and the Petersburg State Colony for Mental Defectives be staffed with Negro personnel has run into a rather curious snag.

The bill sponsored by Delegate Baldwin of Norfolk, authorizing the staffing to be done as per the Governor's recommendation provides that Negro personnel should take charge "as soon as practicable."

But the bill was amended in committee, and the real phenomenon in the amendment is the stipulation for the "appointment of Negroes who have been residents of Virginia ten years or longer."

This seems to be a form of special legislation that is unique. We wonder — and we are certain that others will wonder — why, in the case of Piedmont Sanatorium, a Negro cannot be appointed to the staff unless he has been a resident of the state for ten years. Considering the paucity of Negro doctors, nurses and technicians in the state at the present time, it appears that this special legislation would preclude the naming of a Negro staff. It is a circumvention unworthy of the State of Virginia. 2-26-44

It is fairly certain that a competent man — a man well trained in the most modern methods of treating tuberculosis — can be obtained outside of the state. We are certain that Dr. Riggin and the State Board of Health are aware of this.

North Carolina

The contention of the State Board of Health has been that it is not possible to find qualified Negroes to staff the hospital. Granting that the head physician and surgeon of a tubercular hospital should be a man who is a specialist in that disease, we know of no reason why the institution cannot be competently staffed with both Negro physicians and technicians. To all those — including the State Board of Health and Dr. I. C. Riggin, State Health Commissioner — we point with pride to the admirable manner in which Norfolk Community Hospital is now being conducted with an all-Negro staff from top to bottom. This staff of Negro physicians and administrators has won an A-1 rating from the American Hospital Association. We don't believe that the State Board of Health and Health Commissioner Riggin have under their supervision anything in the state that has won a higher rating.

The strange special legislation relating to the staffing of Piedmont with Negro personnel seems to be untenable from any point of view, and we trust that if the bill goes through the Senate as amended in the House that Governor Darden will veto it.

Negroes Contribute $1,250 to Hospital

Ahoskie, N. C. Herald

Contributions totaling $1,250 have been received from the Negroes in Hertford county by the Roanoke-Chowan Hospital, Inc., J. B. Burden, secretary, announced this week. 6-1-44

H. D. Cooper, principal of the Robert L. Vann school in Ahoskie, is chairman of the commitee to solicit funds from the Negro citizens in the county.

Contributors to date have been: Phillipi Baptist church, $250; C. S. Yeates, $100; Ahoskie Chapter Daughters of Elks, $100; R. H. Patterson and wife, $100; Hertford County Undertakers Union, $100; Chester and Virginia Hart, $100; Hattie L. Beverly, $100; Harrellsville Chapel Church, $100; Jerusalem Lodge of Masons No. 96, $100; Pleasant Plains Baptist church, $200.

NEGRO HOSPITAL DRIVE STARTED

News Herald, Morganton, N.C.
July 4, 1944

Hospitalization Contract System To Be Decided By Response.

A campaign will be conducted during July for the colored hospitalization contract system of Grace Hospital which will probably determine whether the hospital will continue to offer at special rates the "hospital insurance" service for Burke county Negroes.

Administrator S. K. Hunt said the colored contract system has 241 members as chief beneficiaries, exclusive of dependents, and the goal has been set at 310 or one-tenth of the county's Negro population. If this goal, entailing an increase of 70 contracts, is not reached during July, the hospital will probably discontinue the system, which has been conducted for the past five years as a service project with colored residents paying just about 50 cents on the dollar in comparison with regular rates. Daisy Moore Avery is the hospital representative for the campaign, which will be carried on through July only. July 4, 1944

Among Burke's white population, one person in three is covered by a hospitalization contract, Mr. Hunt pointed out. With a membership of 12,000 in the North Carolina Hospital Saving association, Burke is exceeded only by Mecklenburg and Forsyth, ranking third in the State in the number of people having hospital insurance.

25-1944 Ohio

Bricker's 'Manpower Shortage' Laid to Jim Crowism

PM—New York, N.Y.

'Economy' Plus Race Ban Blamed For Revolting Hospital Conditions

11-1-44

PM sent I. F. Stone to Ohio to look into Gov. Bricker's administration. Today he tells how Bricker's much advertised "economy" coupled with Jim Crowism has made a hell for unfortunate Ohioans in the State hospitals.

By I. F. Stone
Special Correspondent

PM Exclusive

CLEVELAND, Ohio Nov. 1.—Gov. John W. Bricker's excuse for evil conditions in Ohio State hospitals is lack of manpower but the real reasons are economy at the expense of the State's unfortunates, and Jim Crowism.

A committee made up of Dr. D. R. Sharpe, president of the Cleveland Church Federation and executive secretary of the Cleveland Baptist Assn., George Washington, of the Cleveland Urban League, and Charles S. Loeb, city editor of the Cleveland *Call and Post*, a Negro weekly—is preparing a report on Jim Crowism in mental hospitals at Cleveland, Columbus, Cincinnati, Dayton and Lima.

This group so far has discovered that: 11-1-44

¶ The unwritten policy of the State Welfare Dept. is not to hire Negroes, though whites and blacks worked together successfully at Cleveland State Hospital for the Insane when there was a WPA project there.

¶ Although this unwritten policy will not be publicly admitted, there are only 145 Negroes among the 5000 employes of the Welfare Dept.

¶ Negroes are not used as attendants although insane patients are.

¶ Jim Crowism is applied on the staffs but not in the hospitals themselves, where white and black are mixed together without race friction.

Protest Ignored

¶ If a qualified Negro happens to apply for a job, he is told he cannot live on the premises or eat with other employes. The hospitals are in secluded areas, hard to reach. Whites who live off the premises are given an additional allowance but this is refused to Negroes. 11-1-44

¶ Bricker has declined to answer a series of inquiries and protests about the refusal to hire Negroes.

Last July, Dr. Sharpe wired Bricker's State Welfare Director, on behalf of the Cleveland Church Federation's Public Affairs Committee:

"In view of your defending neglect and abuse of mentally ill patients in terms of manpower shortages, we call upon you to correct the condition under which not one Negro employe can be found in Ohio mental hospitals. In behalf of our committee, severely protest policy of exclusion which is both un-American and detrimental to best interests of patients."

No answer was ever received.

Deplorable Morale

Meanwhile, the State Hospital continues to be a hell for its unfortunate inmates because Bricker is more interested in making an "economy" record for political reasons than in paying decent wages and providing decent food and medical care. 11-1-44

Even after several wage increases, attendants at the hospital start as low as $70 a month plus maintenance. The employees in the wards work 12 hours a day and have every eighth day off. Most of them are "drifters," force the patients to do most of the dirty work and receive little, if any, training.

The authorized staff of the hospital is below standard but the actual staff last June was only 61 per cent of that authorized. A subcommittee of the Governor's own Investigating Commission reported that "low wages, long hours, lack of effective organization and lack of training" had produced "deplorable lack of morale in the staff" and contributed to "an amount of rough treatment of patients which should not be tolerated in any modern hospital." 11-1-44

"Economy" is also reflected in poor medical care and in disgracefully bad feeding. The subcommittee report referred to above disclosed that the hospital had only five physicians for 2880 patients and that there was "a lack of proper balance in the diet and in some cases insufficient quantity."

That's putting it mildly. The testimony of former attendants showed that over a year's time the only meat served was mouldy weiners, utility beef, scraps and poorer cuts of pork. Patients got a cup of skim milk a day over their breakfast gruel and one-sixtieth of a pound of oleomargarine daily. The coffee was the cheapest available and kept stored in a toilet. The only food served in abundance was bread and this was of the poorest often mouldy and shared with the rats and roaches of ill-kept store rooms. 11-1-44

How did the situation in Cleveland State Hospital come to light? In 1942 the manpower shortage was so serious that 30 conscientious objectors were made available to the hospital for service. One of the great stories of the war period is the noble service at disagreeable tasks furnished by conscientious objectors in similar institutions the

But in Ohio, as in Virginia and New York, these young men, many of them well educated, virtually all of them religious idealists, declined to keep quiet about the conditions they saw.

In Cleveland, as elsewhere, they protested and here they found support in two sources. Walter Lerch, the able science editor of The Cleveland *Press*, a Scripps-Howard sheet with enough of the old Scripps spirit to wage a local cleanup camapign, began to print the truth about the hospital last Fall. 11-1-44

The stories told by the conscientious objectors also aroused the interest of Dr. Sharpe, for 20 years executive secretary of the Cleveland Baptist Association. Slight of build and deaf, Dr. Sharpe is one of those Christian ministers who are not afraid to step out of their pulpits and fight to apply Christian principles to the social problems around them.

Dr. Sharpe is chairman of the Public Affairs Committee of the Cleveland Church Federation which will make a full report on the hospital within a few weeks. The Federation and the Cleveland *Press* prodded Bricker into action.

First Bricker declared that he found the revelations "incredible." He ordered an investigation. But this investigation was made by Bricker's own State Welfare Director, Herbert R. Mooney, the official ultimately responsible for conditions in Ohio State institutions. Mooney as expected, completely exonerated the hospital. 11-1-44

In the meantime eight of the conscientious objectors were removed by the superintendent of the State Hospital as "temperamentally unfit." Oddly enough one conscientious objector accused by the others of attacking a patient was retained when the others were discharged.

"Admittedly," the Cleveland *Press* said, the conscientious objectors were dismissed because "they will not keep quiet and help to cover up the brutalities perpetrated in the hospital." Selective Service and the American Friends Service Committee finally removed all the "CO's" from the hospital.

Action Forced

But neither the Mooney whitewash report nor the removal of the CO's was able to stop public criticism and earlier this year Bricker was forced to appoint an Investigating Commission. 11-1-44

A subcommittee of this Commission made a report in August which described the "CO's" as "intelligent and alert" and said they were "a source of information and a source of possible assistance in a critical time of which we believe the hospital authorities did not take proper advantage." That subcommittee, as is obvious from the quotations in this series, supported all the main charges against the hospital but a real clean-up waits on a full report by the Commission and by the Church Federation after election.

In the meantime the Cleveland *Press*, which is supporting Bricker and Dewey, has soft-pedaled its fight. The Cleveland *Press*, like other Cleveland papers (all pro-Dewey) are also supporting Mayor Frank J. Lausche of Cleveland for Governor on the Democratic ticket.

Issue Dodged

This may explain why Lausche, woh has much support among Ohio anti-New Dealers, has said little about the State Hospital, although as Mayor of Cleveland and candidate for Governor he might have made it a campaign issue. Lausche has limited himself to this statement: 11-1-44

"Ohio ranks fourth among the states in population and sixth in agriculture and minerals, but among the last of the states in housing and humane treatment of the mentally sick. Intelligent dealing with these wards of the State must be our first order of business. . . . This has been neglected too long. Ohio cannot continue to bear the odium of responsibility for this neglect."

Mayor Stewart of Cincinnati has promised a new mental hospital set-up but the state Republican platform calls for "continuation of present policies" on welfare and that means continuation of the conditions exposed here.

25-1944

Ohio

Ohio Negro Paper Hits Hospital Jim Crow Hiring

Daily Worker — New York, N.Y.

7-30-44

CLEVELAND.—In the midst of a heated public discussion of the disgraceful conditions existing in Ohio's mental institutions, the Cleveland Call-Post, outstanding Negro newspaper, makes a sharp expose of a deliberate policy of discrimination within these desperately understaffed hospitals.

Investigations of racial discrimination in mental hospitals was made by that paper, by the secretary of the Urban League, George Washington, and Dr. D. D. Sharpe, chairman of a committee of the Cleveland Church Federation. The article, headed "State Hospitals Cry 'Labor Shortage' But Cling to Ban on Negro Workers," clearly proves that in spite of the revelations of brutality against the patients due mainly to shortage of labor, Negroes who are fully qualified to serve as attendants are turned down in preference to using insane patients for these jobs.

These conditions are clearly to be laid at the doorstep of Gov. Bricker, who boasts a saving of $14,000,000 in the treasury, at the expense of the lives, health, safety and civil liberties of the people of the State. The exclusion of Negroes from employment in State hospitals leads directly from a well-defined policy of the Department of Public Welfare in the State of Ohio to the Governor's office. 7-30-44

Charles H. Loeb, reporter for the Call-Post says: "One hundred and twenty men and women short of its quota of 300 employes, Cleveland State Hospital has deprived almost 3,000 patients of vitally-needed care by refusing to hire Negroes for any position whatsoever." The article goes on to show that the basis of discrimination lies in the claim of the administration that they cannot house Negroes on hospital premises nor will they allot the $10 per month which is given to whites who live off the premises.

"A case in point," cited in the article, "is that of a colored graduate of a nearby college who was sent to Cleveland State Hospital with a letter of introduction from a Congressman. A qualified laboratory technician, she was referred to the hospital's kitchen for employment at a wage under $50.00 a month. Dr. Lee (former superintendent) maintained that he was willing to hire her, but that she could not live on the premises or eat with the employes. In addition, she was denied the extra allotment given whites who live off the hospital grounds." 7-30-44

Other cases are noted which conclusively prove the guilt of the State Administration under Bricker, since, formerly, when federal funds were used, Negroes worked in these institutions on WPA.

"Exclusion of Negroes from hospital employment is among the most vicious forms of racial discrimination. The real victims are the patients, most of whom are white," said Dr. Sharpe, who was quoted in the story. "Paradoxically," comments the Call-Post, "white and Negro patients intermingle in complete social equality. Living, sleeping and sharing the same toilet facilities together, not a single case of racial tension between the patients has come to the attention of the investigators." 7-30-44

A sharp protest has been made to the Department of Welfare against the policy of discrimination, as a policy which is both un-American and detrimental to the best interests of the patients.

25-1944

Mercy Hospital Gets $48,500 Grant

Leonard & Eubank — Norfolk, Va
7-1-44

NEW YORK — Regional Director John M. Gallagher has informed Dr. John H. Graves, director of Mercy Hospital and School of Nurses in Philadelphia, that the President had approved a grant of $48,600 in Federal Works Agency funds for construction and equipping of facilities to provide quarters for 24 student nurses. The project will cost an estimated $63,600.

THE HOSPITAL

"Mercy Hospital is an institution operated by and for Negroes, and its school of nursing has been approved for participation in the program for the training of nurses for the armed forces, governmental and civilian hospitals, health agencies and war industries," Mr. Gallagher said. "Present living accommodations and training facilities are insufficient for an expanded enrollment."

Tennessee

25-1944

EXPANSION PLANNED FOR NEGRO HOSPITAL

Memphis, Tenn., Com'rcial Appeal

January 24, 1944

Plantation Manager's Donation Makes 50 Beds Possible

NURSES' HOME PROPOSED

The Friendly Clinic, 514 Beale, nonprofit negro hospital, will be expanded in the next five months to a 50-bed institution, according to John R. Arnold Jr., executive secretary. The expansion, he said, has been made possible through a $9400 contribution by Jim Crane, manager of the Lee Wilson plantation in Arkansas.

The clinic, which serves West Tennessee, North Mississippi, East Arkansas and Southeast Missouri, has grown from a one-bed hospital to a modern 25-bed clinic in little more than a year.

Wants To Buy Lot

Arnold also said the hospital now has a bid before the City Commission for a lot 83½ by 245 feet on the east side of the clinic to be used in the construction of a new hospital after the war. Also proposed is a nurses' home, through which the Friendly Clinic will build up a staff of sufficient size to handle the planned expansion.

One of the persons most interested in the clinic, Mr. Crane last week gave $6000 to the hospital to be used in expanding the present 25-bed capacity. Mr. Crane also told the executive secretary that approximately $3400 worth of wiring, needed to fit the basement for use, could be done at his expense.

Mr. Crane, a member of the Board of Trustees of Methodist Hospital, recently was elected to the Board of Advisors of the Friendly Clinic. Other members of the board include Mrs. Van Vleet King, Phil Pidgeon, J. B. Rozier, Charley Lawrence Jr., Mrs. Mabel Giesuk, Alverson Shannon, Tom Lee, Leslie Stratton Sr., Raymond Skinner, E. C. Claiber and Harry Pierotti.

Physicians Needed

One of the most tragic aspects of medical attention for the negro community is the lack of competent physicians, said Dr. S. B. Hickman, resident physician and medical director.

"We have far more work than we can possibly do," he said. "While we have obtained the service of a doctor, now practicing in New York City, who is to come with us July 1 still we will need more men.

Dr. Hickman, who served as captain in the Medical Corps during World War I, said he hoped newly graduated doctors would be attracted by the expanded facilities planned by the Friendly Clinic.

While the institution is operated as a general hospital, the medical director said venereal diseases still remain one of the worst headaches and the greatest volume of patient load. The annual report of the executive secretary showed that for the last 45 days there has been an average of 12 operations per week.

23 Doctors On Call

During 1943 there were 363 hospital cases, which included 187 from Arkansas, 84 from Mississippi and 92 from Tennessee. Peak months were November, with 46 patients, July with 42 and August with 36. Of the 363 year's total there were 131 men and 232 women, with 290 of the number surgical cases. The hospital delivered 73 babies, the report showed. Approximately 30 per cent of the work done at the clinic is charity and slightly more than 15 per cent is classed as emergency, according to the report.

At the present there is only one resident physician, Dr. Hickman, but 23 visiting doctors, 14 of them white and nine negro, serve the clinic on call.

The clinic was organized primarily to care for indigent patients in the community and those in the low income bracket, but officials hope many paying patients who have gone to other hospitals will now be attracted by the clinic's expanded facilities, thus lowering the overall cost per case.

Hospital Plan Sold

Arnold travels to all the larger plantations in the MidSouth and sells a hospital service plan for $3.50, which entitles every member of the family to 21 days per year hospitalization. The plan has proven to be popular with large plantation owners, who have on several occasions subscribed wholesale for every family on the farm.

Postwar plans worked out by Arnold call for an institution which will serve more than 10,000 families in this section of the South.

He said that while the clinic now is handling an average of seven charity patients a week, it will be able to handle at least 15 a week if present expansion plans go through. He explained that patients protected under the hospital service plan are not charity patients.

25-1944

Negro Hospital Selected As Depot For Pnicillian

Informer – Houston, Tex.

6-10-44

HOUSTON.—In an official release from Miss H. M. Lyttle, superintendent of the Houston Negro hospital, this week it was announced that the War Production Board has selected the hospital as a "depot hospital" for the storage and distribution of Penicillian.

Penicillian, one of the outstanding discoveries of medical science, is specific in certain types of bacterial infection such as pneumonia, meningitis, etc. Until reenctly the drug has not been available for civilian use. The entire supply has been going to the armed forces.

The nospital has been supplied with 4,000,000 units Penicillian which means that Negro physicians will have ample supply of this precious drug for use when its need is indicated.

25-1944

Women Favor Negro Staffing Of Sanitarium

Norfolk, Va Pilot
February 1, 1944

The Woman's Club of Norfolk, in business session yesterday, endorsed Governor Darden's proposal to staff the Piedmont Satitarium with Negro personnel and asked the State Board of Health to reconsider its decision as a means of fostering better relationships.

The recommendation was one of several requested by the State President-Director, Mrs. R. G. Boatwright, of Coeburn. One favored raising teacher salaries to $1,200 per unit, another asked the Governor and the General Assembly to meet the demand if possible.

A third recommendation was to request the Governor to appoint an additional woman to the State Board of Education when the next vacancy occurs, and a fourth to throw full support and co-operation with officials and other groups to combat the increased rate of juvenile delinquency.

A nominating committee was named as follows: Mrs. Grover Cleveland Outland and Mrs. Harry B. Adreon, from the Board of Governors; Mrs. A. L. Bonwell, Mrs. Ernest R. Ball and Mrs. W. C. Davis, Jr., from the general membership.

Mrs. Lewis Littlepage, chairman of ways and means, reported more than $200 raised at a card party in December. J. Carlton Hudson, introduced by Mrs. Frank L. Nicholson, corresponding secretary, spoke on the United War Fund.

Federal Aid Given Va. Negro Hospital

7-11-44
Alexandria, Va, Gazette

RICHMOND, Va.—Allocation of a federal grant of $34,500, representing 50 per cent of the estimated cost of proposed improvements at St. Philip's Hospital for Negroes, a unit of the Medical College of Virginia Hospital in Richmond, has been approved by the President, according to information received today by FWA Regional Director C. L. Vickers from Major General Philip B. Fleming, Federal Works administrator.

7-11-1944

Preliminary plans prepared by Baskerville & Son, architects, of Richmond, call for alterations to the basement and part of the first floor of the hospital building to provide additional cafeteria facilities, expansion of the X-ray department and facilities for the instruction of technicians in the physiotherapy department.

Virginia

Negro Piedmont Staff May Wait Indefinitely

Journal & Guide
Norfolk, Va.

Matter Given To Health Board To Use Its Own Discretion

3-4-44

RICHMOND, Va. — Virginia's Piedmont Tuberculosis Sanatorium for colored people will continue indefinitely with its all-white medical staff, despite Governor Darden's vigorous recommendation to both the State Board of Health and to the General Assembly, that the institution be provided with a Negro medical staff, and arrangements made to afford special training at the Sanatorium for Negro doctors to better prepare them to cope with the high TB death rate among Virginia Negroes.

The State Board of Health turned the Governor's recommendation down flat. The General Assembly passed a "permissive" resolution designed to give approval to staffing the sanatorium with colored doctors whenever the State Board of Health and its hospital board felt so disposed.

MUST RESIDE IN STATE FIVE YEARS

The General Assembly also killed the Governor's recommendation by inserting in the permissive resolution the proviso that any Negro doctor appointed to the staff must have been a resident of the State for five years. In other words, a Negro physician must go somewhere outside the State of Virginia and do post-graduate work in the field of tuberculosis, and must then return and reside in the state five years before he can be appointed to the staff at Piedmont or any other medical center for Negroes in the State.

The now famous resolution is patterned after the "Black Laws" directed to the repression of the Negro since the first Virginia General Assembly met in June, 1607, and continued until 1930. This is the first measure of its kind since 1930.

3-4-44

TEXT OF RESOLUTION

The resoluton follows:

HOUSE JOINT RESOLUTION NO. 18

Recommending that certain State Institutions be provided with operating staffs composed of members of the Negro Race.

Whereas, the Petersburg State Colony at Petersburg and the Piedmont Sanatorium at Burkeville are organized and operated for the care and treatment of members of the colored race, and for that reason should, as early as practicable, be placed under the administration and control of Negroes; now therefore,

Be it Resolved by the House of Delegates, the Senate concurring, that it is the sense of the General Assembly of Virginia that the State Hospital Board and the State Board of Health should proceed as conditions permit to provide the Petersburg State olonoy and the Piedmont Sanatorium, respectively, with an operating staff composed entirely of members of the Negro race, WHO FOR FIVE YEARS PRIOR TO THIS APPOINTMENT HAVE BEEN RESIDENTS OF THE COMMONWEALTH OF VIRGINIA.

BE IT FURTHER RESOLVED, THAT THE TIME AND MEANS OF

Negro Journal & Guide
Hospital Va.
6-10-44

From Lynchburg Daily Advance

There should be no great delay in settling the problem of permitting Negro doctors to practice their profession in Lynchburg General Hospital. There is no need to discover what other cities do. This is Lynchburg's problem. The decision is for the Lynchburg City Council to make. There is nothing obscure or difficult about it. The whole thing has been gone over before and the facts are known.

The issue is clearcut. Lynchburg either should admit Negro doctors to practice in and use of the facilities of Lynchburg General Hospital, with their own patients, else a separate hospital for Negroes should be provided. There is no just alternative.

The health of a community must extend to the entire community. Medical care and hospital facilities must, in a modern, healthy community be available for any and every part of the population. A health program on any other basis is a farce and without justice. A desirable growth of Negro professional medical services for Negroes requires full hospital facilities for use of Negro doctors and nurses.

There is no sound reason why Lynchburg General Hospital can not make its facilities available to Negro doctors and provide Negro nurses for their patients. There is in such a provision no break-down of the social segregation of the races upon which the South insists and will continue to insist. To provide such facilities is in line with the justice, the fairness which all decent Southerners believe should be exhibited by the white race toward the Negro race.

The Negro doctors suffer economically from lack of hospital facilities for their practice. What economic advantage is thereby automatically thrown to the white doctors is not desired by the white doctors. But it is a matter of not only simple justice that the economic advantage should not be denied to the Negro doctor. It is a matter of promoting sound Negro medical services, services of a high calibre, available at all times to the Negro patients who wish to utilize and support the services of their own race.

If City Council is unwilling to open Lynchburg General Hospital to Negro doctors and nurses for Negro patients, the only just alternative is to provide a separate Negro hospital. A movement toward providing a Negro hospital gained strength here several years ago. It failed because adequate funds could not be secured. The News and The Daily Advance strongly supported the effort.

When plans for the present remodeled Lynchburg General Hospital were drawn they included complete facilities for Negroes, patients, doctors and nurses, according to informaiton given us. For some reason those facilities were never fully developed and put to use. Whatever the reason it could hardly be adequate.

A handicap to opening the local hospital facilities fully to Negroes is the difficulty in securing Negro nurses. Having had no place to exercise their function there has been no demand and no training for Negro nurses here. Part of the City Council's duty in this matter is to take measures for providing Negro nurses.

There has been no training class for Negro Nurses Aides because of lack of hospital facilities for them. This, too, should be provided, to secure that invaluable permanent as well as emergency training, as an individual and community asset.

Quick, just, adequate action should be taken on this entire problem by City Council.